## FORM 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Was	shinat	on. D	.C. 2	20549

<b>ANNUAL</b>	<b>STATEMENT</b>	OF C	HANGES	IN BENEFI	CIAL

OMB APPROVAL									
OMB Number: 3235-0362									
Estimated average burden									
hours per response	1.0								

Check	this box if no lo	nger subject			V	vasning	ion, i	J.C. 205	149						OME	3 APPRO	VAL
to Sect obligati Instruc	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							E	OMB Number: 3235-0362 Estimated average burden hours per response: 1.0								
Form 3	Holdings Repo	orted.	Fil-	d	4:	- 40(-)	- 6 41	. 0	: <b>F</b> b		A -4 -	£ 400.4		<u>  [                                   </u>	- Iouro per i		1.0
Form 4	Transactions I	Reported.	FIIE	or Section 3								of 1934					
1. Name and Address of Reporting Person* <u>Turner James S. Jr.</u>			2. Issuer Name and Ticker or Trading Symbol CapStar Financial Holdings, Inc. [ CSTR ]							Relationshi Check all ap X Dire	olicable)	rson(s) to Issuer					
(Last) (First) (Middle) 1201 DEMONBREUN ST SUITE 700				12/31/202	Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2022  4. If Amendment, Date of Original Filed (Month/Day/Year)						Officer (give title Other (specify below) below)  6. Individual or Joint/Group Filing (Check Applicable						
(Street)	ILLE TN	I	37203	-								Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(Sta	ate)	(Zip)														
		Tabl	e I - Non-Deriv	ative Secui	ities	s Acq	uire	d, Dis	posed	d of,	or E	Benefic	ially Own	ned			
1. Title of Se	ecurity (Instr. 3	3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	, 1	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dis Of (D) (Instr. 3, 4 and 5)			r Dispose	5. Amount of Securities Beneficially Owned at end			ship Ind Direct Be	lature of irect neficial	
					,			Amount	:	(A) oi (D)	P	rice	Issuer's Year (Ins	Fiscal	Indire	ct (I)   (Ins	Ownership (Instr. 4)
Common	Stock		05/19/2022			G		61,8	335	Α		\$0.00	307,	037(1)	I	)	
Common	Stock <sup>(2)</sup>												72,	489			nes S.
Common	Stock <sup>(2)</sup>												96,	090			dith P rner
Common	Stock <sup>(2)</sup>												75,	643	1	Pri Tri TI Ka Ro Tu 19 Gr	rner
Common Stock <sup>(2)</sup>												75,643		1	Family Private Trust LLC TTEE The James Stephen Turner III 2000 Grandchilds Trust		
		T	able II - Deriva	tive Securit uts, calls, v										d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date,	4. Transaction Code (Instr.	5. Nu of Deriv Secu Acqu (A) o Disp of (D	vative urities uired or loosed 0)	6. Da Expir		isable ar	nd 7	7. Title Amou Secur Jnder Deriva	e and int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Nun deriva Securi Benefi Owned Follow Repor Transa (Instr.	tive ities icially d ving ted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					<b>(A)</b>		Date	cisable	Expirati Date		itle	Amount or Number of Shares	1				

## **Explanation of Responses:**

- $1.\ Includes\ 245,\!202\ shares\ previously\ reported,\ including\ shares\ of\ restricted\ stock,\ some\ of\ which\ remain\ unvested.$
- 2. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

## Remarks:

Attorney-in-Fact for James S. Turner

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.