FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	.C. 20549
----------------	-----------

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Lambert Kevin					2. Issuer Name and Ticker or Trading Symbol CapStar Financial Holdings, Inc. [CSTR]										k all app Direc	licable) tor er (give title	ng Person(s) to Is 10% Ov Other (s below)		wner		
(Last) (First) (Middle) 1201 DEMONBREUN STREET SUITE 700						3. Date of Earliest Transaction (Month/Day/Year) 12/31/2022										Chief Credit Officer					
(Street) NASHV			7203		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5)		Zip)																		
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			tion 2A. Deemed Execution Dat			d Date,	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)) or 5. Amo 4 and Securit Benefic		unt of ties cially Following	Forn (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) c	or Pric	e	Transa	ction(s) 3 and 4)			(111501.4)		
Common Stock ⁽¹⁾ 12/31/				12/31/2	2022				F		93	D	\$1	7.66	66 794		D				
Common Stock ⁽²⁾																101		I	By 401(K) Plan		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Derivative				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc ion Da Day/Y		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In:	. Price of lerivative security nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code V (A) (D)		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	er								

Explanation of Responses:

- 1. The reported item represents the shares withheld by the issuer to cover tax withholding obligations in connection with the vestings of 379 shares.
- 2. The reported item reflects the reporting person's interest in equivalent shares held by the unitized stock fund in the issuer's 401(k) plan ("Plan"). The unitized stock fund consists of approximately 95% of the issuer's common stock and approximately 5% cash or cash equivalents. The number of shares attributed to the reporting person as a Plan participant and expressed as equivalent shares has been calculated based on the \$17.66 closing price of the issuer's common stock as of December 31, 2022 and may change from time to time without the volition of the reporting person depending on the fair market value of the issuer's common stock and the amount of cash in the fund.

Remarks:

/s/ Jeffrey L. Moody, as Attorney-in-Fact for Kevin L. 01/04/2023 Lambert

** Signature of Reporting Person Date

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

- * 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.