FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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* Browning Scot Richard						2. Issuer Name and Ticker or Trading Symbol Capital Bancorp Inc [CBNK]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					15	apııc	ar Danie	<u>.UI þ</u>	<u>me</u> į c	DIVI	`]		Ι,	X Directo	,		10% Ov	vner	
															(give title		Other (s	specify	
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								below)	,				
2275 RESEARCH BLVD.			12	12/31/2019								President of Capital Bank							
SUITE 6	500																		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ROCKVILLE MD 20850														X Form filed by One Reporting Person				n	
														Form fi	iled by More than One Reporting			ting	
(City)	(9	State)	(Zip)											Person					
(Oity)			,																
		Tal	ble I - Nor	n-Deriv	vativ	e Se	curitie	s A	cquired,	Dis	posed o	f, or Ber	neficial	y Owned					
1. Title of Security (Instr. 3)				sactio		2A. Deemed Execution Date,		3. e, Transaction			ies Acquire		5. Amou				7. Nature of Indirect		
Date (Month/I					te onth/Day/Year)		if any		Code (Instr.					Beneficia	ally (D)) or Indirect (Instr. 4)	Beneficial Ownership	
							(Month/Day/Yea		ar) 8)	1		(0)	_	- Reported	1 [(1) (111		(Instr. 4)	
										l۷	Amount	(A) or (D)	Price	Transact (Instr. 3 a					
Common Stock														474	,862	B62 D			
			Table II -	Deriva	ative	Sec	urities	Δα	uired C	ien	nsed of	or Bene	ficially	Owned					
											onvertik			Ownca					
1. Title of							5. Number		6. Date Exercisab					8. Price of	9. Numbe		10.	11. Nature	
Derivative Security	Conversion or Exercise		Execution D if any (Month/Day/	Co	Transa Code (of Derivative Securities Acquired (A) or Disposed		Expiration Date (Month/Day/Year			of Securit Underlyin		Derivative Security	derivative Securities		Ownership Form:	Beneficial	
(Instr. 3)	Price of Derivative				В) `						Derivative Se (Instr. 3 and 4			(Instr. 5)	Beneficially Owned Following Reported	lly	Direct (D) or Indirect	Ownership (Instr. 4)	
	Security												.u .,			ı	(I) (Instr. 4)		
							of (D) (Instr. 3, 4 and 5)								Transacti	on(s)			
				F			3, 4 and) 		Т				-	(Instr. 4)				
													Amount or						
						l	l		Date		Expiration		Number of						
					Code	٧	(A)	(D)	Exercisab	le	Date	Title	Shares	1					
Stock Options	\$14.89	12/31/2019			A		11,500		12/31/2020)(1)	12/31/2024	Common Stock	11,500	\$0	11,50	0	D		
Stock Options	\$7.5								12/31/2010	6(1)	12/31/2020	Common Stock	12,000		12,00	0	D		
Stock Options	\$8.5								12/31/201	7(1)	12/31/2021	Common Stock	10,000		10,00	0	D		
Stock Options	\$12.38								12/31/2018	3(1)	12/31/2022	Common Stock	14,000		14,00	0	D		
Stock Options	\$11.38								12/31/2019	9(1)	12/31/2023	Common Stock	14,000		14,00	0	D		

Explanation of Responses:

1. The Stock Options vest in four equal annual installments beginning on the first anniversary of the date of grant.

Remarks:

/s/ Alan Jackson, as Attorney-

01/02/2020

in-Fact

** 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.