FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEF	ICIAL OW	/NERSHIP

OMB APPI	ROVAL
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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

1. Name and Address of Reporting Person* Bryan Nick					2. Issuer Name and Ticker or Trading Symbol Capital Bancorp Inc [CBNK]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify								
(Last) (First) (Middle) 2275 RESEARCH BLVD SUITE 600				3. Date of Earliest Transaction (Month/Day/Year) 09/04/2019										X Officer (give title Officer (specify below) Executive V.P., CMO, and GM									
(Street)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)													1 010011							
		Tal	ole I - Nor	n-Deri	vativ	e Se	curi	ties Ad	cqui	ired,	Disp	osed of	f, or B	enet	ficially	Owned							
Date		Date			2A. Deemed Execution Date, if any (Month/Day/Year)		, i	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct 	7. Nature of Indirect Beneficial Ownership					
										Code	v	Amount (A) or (D)		or	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)			
Common Stock (09/0)4/201	1/2019			M		13,000) /		\$6.63 30		,780		D						
Common Stock 09/			09/0)4/201	4/2019			M		20,000) [\	\$6.63	50,	,780		D						
Common Stock 09/04)4/201	/2019			M		9,000	I	\	\$7.5		,780		D							
Common Stock 09/04)4/201	/2019				M		7,000	I	1	\$8.5	66,	,780		D						
Common Stock 09/			09/0	04/201	/2019			F		29,127	7 I		\$12	37,	653		D						
			Table II -									osed of, onvertib				Owned							
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr r) 8)		n of l		Expi	6. Date Exercisabl Expiration Date (Month/Day/Year)			of Secu Underly Derivat	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	Owners Form: Ily Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	de V		(D)	Date Exe	e rcisable		Expiration Date	Title	OI N Of	umber								
Stock Options	\$6.63	09/04/2019			M			13,000	12/3	31/2015	(1)	12/31/2019		ommon Stock 13,0		\$0	0		D				
Stock Options	\$6.63	09/04/2019			M			20,000	01/3	31/2016	(1)	01/31/2020	Commo		0,000	\$0	0		D				
Stock Options	\$7.5	09/04/2019			M			9,000	12/3	31/2016	(1)	12/31/2020	Commo		9,000	\$0	3,000)	D				
Stock Options	\$8.5	09/04/2019			M			7,000	12/3	31/2017	(1)	12/31/2021	Commo		7,000	\$0	7,000)	D				
Stock Options	\$12.38								12/3	31/2018	(1)	12/31/2022	Commo		2,000		12,000		D				
Stock Options	\$11.38								12/3	31/2019	(1)	12/31/2023	Commo		0,000		10,00	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 Attorneyin-Fact

09/06/2019

** 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.