FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | | | | | | | |

| | 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* Poynot Steven M | | | | | | 2. Issuer Name and Ticker or Trading Symbol Capital Bancorp Inc [CBNK] | | | | | | | | | k all app | , | | erson(s) to Is 10% O Other (| wner |
| (Last) (First) (Middle) 2275 RESEARCH BLVD, SUITE 600 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/14/2023 | | | | | | | | Λ | below | , | perat | below) erating Officer | |
| (Street) ROCKV (City) | | | 0850 Zip) | | 4. If <i>I</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) X | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Inst 5) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r _{Pr} | ice | Transa | ction(s) 3 and 4) | | | (111341. 4) |
| Common Stock 03/14/2 | | | | | 2023 | | | | P | | 900 | A | | \$17 | 2 | ,900 | | D | |
| Common Stock 03/14/2 | | | | | 2023 | | | | P | | 100 | A | \$ | 16.99 | | ,000 | | D | |
| | | Tal | ble II - | | | | | • | | • | osed of, convertib | | | - | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | of Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5) | | vative urities uired or oosed O) tr. 3, 4 | 6. Date Exercisable an Expiration Date (Month/Day/Year) Date Exercisable Expiration Exercisable Date | | tte (ear) | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Share | | De Se (In | Price of privative curity (str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

Remarks:

/s/ Connie Egan

03/15/2023

** 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.