FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)																	_
1. Name and Address of Reporting Person* SMITH WILLIAM G JR				CAI	2. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director X_ Officer (give title below) Chairman, President & CEO								
PO BOX 11248 (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/14/2020								Chairm	ian, Presi	dent &	CEO			
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person								
TALLAHASSEE, FL 32302 (City) (State) (Zip)					Table I - Non-Derivative Securities Acou							ured, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execut	Deemed cution Date, if	Code (Instr. 8)			on 4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)			5. Amount of Beneficially Reported Tr	f Securities Owned Following ansaction(s)		6. Ownership Form:		Indire Benef	icial	
						(Month/Day/Year)		ode	V	Amount	(A) or (D)	Price	(Instr. 3 and	Instr. 3 and 4)		or Ind (I) (Instr.	lirect (Ownership (Instr. 4)	
Common	Stock		01/14/2	2020			1	A		18,046 (1)	A	\$ 0	2,381,598	3 (2) (3)		D			
Common Stock 0			01/14/2	2020			1	A		4,720 (4)	A	\$ 0	2,386,318		D				
Common Stock												524,694		I	5	SSX2,L1			
Common Stock												5,220 ⁽⁵⁾		I	IRA				
Common Stock											55,666	55,666		I	5	Spou	se		
Common Stock												4,905 (6)		I		Spouse- IRA			
Reminder:	Report on a s	separate line	for each c						Per cor the	rsons wh ntained in form dis	o resp n this f splays	orm a a curr	o the collect re not requestently valid	ired to res	spond u	nless	SEG	C 147	4 (9-02)
	I.	I	1.		(<i>e.g.</i> , p	uts, calls, v	varra		otion	s, conver	tible sec	curitie	s)	I	l				
1. Title of Derivative Security (Instr. 3)	Conversion		//Year) E	A. Deemed execution Dany Month/Day/	ate, if	Code	of Deri	ivative urities uired or oosed D)	and Expiration Date (Month/Day/Year) A U S (I		str. 3 and (Instr. 5) Be Or For Ref		Derivati Securitie Benefici Owned Followin Reported	vative Own Forn Derically Secutive Owning Orted or Insaction(s)		of ative ty: (D)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)		
						Code V	(A)	(D)			Expirat Date	ion Ti	Amount or Number of Shares						

Reporting Owners

Ъ	O. N. /	Relationships							
Керо	Reporting Owner Name / Address		10% Owner	Officer	Other				
РО ВОХ	WILLIAM G JR X 11248 HASSEE, FL 32302	X	X	Chairman, President & CEO					

Signatures

/s/ William G. Smith, Jr.	01/15/2020
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Shares granted to the reporting person under the Registrant's Stock-based Incentive Plan (LTIP).
- (2) Includes 395 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP)
- On April 4, 2019, the reporting person received a distribution of 934 shares of common stock previously reported as beneficially owned indirectly through the WGS
- (4) Shares granted to the reporting person under the Registrant's Stock-based Incentive Plan(ASIP).
- (5) Includes 96 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP)
- (6) Includes 90 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP).

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

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