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

Name and Address of Reporting Person * Antoine Robert			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 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 8234 ASHWORTH COURT			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2020										
JACKSONVILLE, FL 32256			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquire				red, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	(A) or (D)	4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficial	nt of Securities Ily Owned Following Transaction(s) nd 4)		Ownership Form: Direct (D)	Beneficial Ownership	
					Code	V Amou	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		02/27/2020		A	1,082 (1)	2 A	\$ 0	1,082			D	
Reminder: I	Report on a s	separate line for	r each class of secur	ities beneficially ow	F	Persons w	ho respon			ction of inf			474 (9-02)
Reminder: I	Report on a s	separate line fo	Table II - I	Derivative Securiti	es Acquired	Persons w contained he form d	ho respondin this for isplays a conf. or Bene	m are currei	not requesting ntly valid	uired to res OMB cont	ormation spond unle trol numbe	ss	474 (9-02)
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Y	Table II - I	Derivative Securities, puts, calls, wa 4. Transaction Code (Instr. 8)	es Acquirec rrants, opti	Persons w contained he form d	of, or Bendriisble securicisable ion Date	eficial rities) 7. Ti Amo	not requesting ntly valid	OMB conf	spond unle	of 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Nat of Indir Benefic Owners (Instr. 4

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Antoine Robert 8234 ASHWORTH COURT JACKSONVILLE, FL 32256	X				

Signatures

/s/ Robert Antoine	03/01/2020
**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) Represents restricted shares of Capital City Bank Group, Inc. common stock granted to the reporting person under the 2011 Associate Incentive Plan, which will vest on December 31, 2020, subject to the terms of the reporting person's Restricted Stock Award Agreement.

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.