FORM 4

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

OMB APPROVAL
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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 Type Responses) 1. Name and Address of Reporting Person * COX CADER B III			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 Officer (give title below) Check all applicable Other (specify below)					
(Last) (First) (Middle) 11991 RIVERVIEW ROAD			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2020												
(Street) CAMILLA, GA 31730			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 Acqui					ired, Disposed of, or Beneficially Owned							
(Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year	Code (Instr.			4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ollowing (s)	` /	Beneficial Ownership	
				Cod	le	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		02/27/2020		A			1,082 (1)	A	\$ 0	52,382.97 (2)			D	
Common Stock										10,500			I	Martha F.H. Cox- Wife	
Reminder:	Report on a s	separate line for	r each class of secur	ities beneficially or		i	Personta conta the fo	ons who ained in orm dis	respor this for plays a	m are currei	not requestly valid		ormation spond unlestrol number	ss	1474 (9-02)
T	ı —		(e.g., puts, calls, w	arrants,	opt	ions,	convert	ible secu	rities)		1	Г		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Date (Year) any	4. Transaction Code (Instr. 8)	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	derlying urities tr. 3 and Security (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Beneficia Ownersh (Instr. 4)	
				Code V	(A) (I		Date Exerc		Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
COX CADER B III 11991 RIVERVIEW ROAD CAMILLA, GA 31730	X					

Signatures

**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.
- (2) Includes 938 shares acquired through the Registrant's Dividend Reinvestment Plan (DRIP)which were exempt from the reporting and short-swing profit provisions of Section 16 of the Exchange Act.

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.