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 Ty	pe Response	s)												
Name and Address of Reporting Person * DAVIS J KIMBROUGH				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) Director 10% Owner X Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 217 N. MONROE STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/13/2021								EVP & CFO)	
(Street) TALLAHASSEE, FL 32302				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					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acqu	hired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			Execution Date, if Code			(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)				Beneficial Ownership	
					Cod	e V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		01/13/2021		A		6,203 (1)	A	\$ 0	76,910.852 ⁽²⁾ ⁽³⁾			D		
Common Stock 01/13.		01/13/2021		A		1,325 (4)	A	\$ 0	78,235.852			D		
Common	Stock									32,388.3	376 ⁽³⁾		I	Joint with Spouse
Common Stock									4,765.34	15 (5)		I	401(k) Plan	
Common Stock									7,257.42	23 (6)		I	Spouse's IRA	
Common Stock									6,711.262 ⁽⁷⁾			I	IRA	
Common Stock								10.211 (8)			I	Spouse		
Common Stock								519,447.37			I	Co- Trustee of J&W Trust		
Reminder:	Report on a s	separate line fo	or each class of secur	ities beneficially o	wned dir	Pers	sons who	respor	m are	e not requ		formation spond unle trol numbe	ss	1474 (9-02)
				Derivative Securit e.g., puts, calls, w										
1. Title of Derivative Security (Instr. 3) Price of Derivative Security		3. Transaction Date (Month/Day/	n 3A. Deemed Execution Da any	4. 5.		6. C and (Mc	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Ame Und Seco	Title and ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported	Owners Form of Derivat Security Direct (or Indir	Beneficial Ownershi (Instr. 4) D) ect
				Code V	(A) (II		_	Expiratior Date	1 Title	Amount or Number of Shares				

B (1 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DAVIS J KIMBROUGH 217 N. MONROE STREET TALLAHASSEE, FL 32302			EVP & CFO				

Signatures

/s/John K. Davis	01/15/2021
***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 Long-term Incentive Plan (LTIP).
- (2) Includes 1816.982 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP).
- (3) Includes 356.362 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP).
- (4) Shares granted to the reporting person under the Registrant's Associate Stock-based Incentive Plan(ASIP).
- (5) Includes 135.409 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP).
- (6) Includes 205.134 shares acquired through the Registrant's Dividend Reinvestment Plan (DRIP).
- (7) Includes 189.696 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP).
- (8) Includes 0.274 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.