FORM 4	4
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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).

(Print or Type Pesponses)

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

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SEC 1474 (9-02)

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 Pe Grant William E	erson [*]	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 Officer (give title below) Other (specify below)			
(Last) (First) 217 NORTH MONROE STRE	(Middle) EET	3. Date of Earliest Transaction (Month/Day/Year) 02/11/2021								
(Street) TALLAHASSEE, FL 32301		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)	Ta	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	Date H (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)			isposed	of (D)	1	Ownership Form: 0f Indire Benefic	Beneficial
			Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) O or Indirect (In (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	02/11/2021		Р		1,090	А	\$ 22.635	16,007 (1) (2)	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Nu	nber	and Expirati	on Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	Month/Day/Year) Underlying		rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	rivative	S		Securities (Instr. 5)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	Securities		(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security				Acquired			4)				0	Direct (D)	
					(A)							T T	or Indirect	
						posed						Transaction(s)		
				of (D)							(Instr. 4)	(Instr. 4)		
					(Instr. 3, 4, and 5)									
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
							Excicisable	Date		of				
				Code V	(A)) (D)				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Grant William E 217 NORTH MONROE STREET TALLAHASSEE, FL 32301	Х						

Signatures

/s/ William E. Grant	02/12/2021	
***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) Includes 1700 shares purchased through DSPP (Director Stock Purchase Plan) which were exempt from the reporting and short-swing profit provisions of Section 16 of the Exchange Act.
- (2) Includes 233 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.