## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

1 0					2. Issuer Name and Ticker or Trading Symbol							5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Criser iviaisfian ivi iii				CAPITAL CITY BANK GROUP INC [CCBG]							_	XDirector 10% Ówner Officer (give title below) Other (specify below)				w)			
(Last) (First) (Middle) 7007 MCBRIDE PT.				3. Date of Earliest Transaction (Month/Day/Year) 12/12/2019															
				4. If Amendment, Date Original Filed(Month/Day/Year) 12/13/2019							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person								
	HASSEE, I		(7)																
(City	)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	Execu	-		(Instr. 8)		(A) or Dis		Disposed	es Acquired posed of (D) and 5)		Reported Transaction(s)			Ownership o Form: B		Beneficial
				(Month/Day/Year)		ear)	Co	ode	V	Amoun	(A) or (D)	Pri		(Instr. 3 and 4)			Director Inc. (I) (Instr	direct (I	wnership nstr. 4)
Common	Stock												1	,765 (1	)		D		
Common Stock 12/		12/12/2019				]	P		1,695 (2)	A	\$ 29.	.41	4,195		I	II	RA		
Reminder:	Report on a s	separate line fo	or each class of secur	ities be	eneficially	y ow	ned o	T I	Pers	ons wh	o resp				ction of inf		ess	SEC 14	74 (9-02)
			Table II - 1		tive Secu			1 quire	the f d, Di	orm dis	splays a	a cu enefi	irrent icially	ly valid	OMB cont				
1. Title of	2.	3. Transactio		<u> </u>	1. cans.		<u>rranı</u> 5.			ate Exer			7. Title	e and	8. Price of	9. Number	of 10	).	11. Natur
Security	ve Conversion Date Execution Date, if Transaction Number and Expiration Date or Exercise (Month/Day/Year) any Code of (Month/Day/Year)		I S	Under Securi (Instr. 4)	ount of derlying urities tr. 3 and Derivative Security (Instr. 5)		Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)									
					Code	V	(A)		Date Exer		Expirati Date	ion	Title	Amount or Number of Shares					

### **Reporting Owners**

D ( O N /	Relationships						
Reporting Owner Name / Address	Director 10% Owner		Officer	Other			
Criser Marshall M III							
7007 MCBRIDE PT.	X						
TALLAHASSEE, FL 32312							

### **Signatures**

/s/ Marshall M. Criser III	02/23/2021
**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)  $\frac{5960}{IRA}$  should have been reported as owned directly at the time of acquisition, but 4195 should have been reported as owned indirectly in an IRA.
- (2) Shares were acquired through an IRA, but were previously reported as acquired directly.

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.