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

	pe Response												1				
Name and Address of Reporting Person * Criser Marshall M 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) Other (specify below)						
(Last) (First) (Middle) 7007 MCBRIDE PT.				3. Date of Earliest Transaction (Month/Day/Year) 04/27/2020													
(Street) TALLAHASSEE, FL 32312				4. If Amendment, Date Original Filed(Month/Day/Year) 04/29/2020							h/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)			Tabl	Δ I - N	Von	_Dori	vativa	Sacurities	Acan	irad Dien	nsed of or I	Ranaficially (Dwned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, if		e, if (3. Transac Code (Instr. 8)		ction 4. Securities Acquirec (A) or Disposed of (D (Instr. 3, 4 and 5)		quired of (D)	Beneficially Owned Following Reported Transaction(s)		6. Ownership Form:	Beneficial				
			(Month/Day/Year)		ear)	Cod	e	V	Amour	(A) or (D)	Price	(Instr. 3 a	nstr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock												2,847 (1)		D	
Common Stock		04/27/2020		P			4,000 (2)	A	\$ 19.6 (3)	8,195			I	IRA			
Reminder:	Report on a s	separate line for	r each class of secur					1	Personta conta the fo	ons whained in	no respo n this for splays a	rm are curre	e not requently valid		ormation spond unle rol numbe	ss	1474 (9-02)
			Table II - I								ot, or Ben tible secu						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Da	Co	4. 5. Number of Code ar) (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ive es d			Ame Und Seco	Title and ount of derlying urities str. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Ownersh (Instr. 4) O)		
				C	Code V	V (A	A) (I	D)	Date Exerc	cisable	Expiratio Date	n Title	Amount or e Number of Shares				

Reporting Owners

B 41 0 Y 4	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Criser Marshall M III 7007 MCBRIDE PT. TALLAHASSEE, FL 32312	X					

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) 11042 shares were reported as owned directly at the time of acquisition, but 8195 should have been reported as owned indirectly in an IRA.
- (2) Shares were acquired through an IRA, but were previously reported as acquired directly.
 - The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$19.28 to \$19.75. The reporting person undertake
- (3) to provide to Capital City Bank Group, Inc. ("CCBG"), any security holder of CCBG, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price.

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.