# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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)													
1. Name and Address of Reporting Person * DREW J EVERITT				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) Officer (give title below)						
(Last) (First) (Middle) 250 JOHN KNOX ROAD, SUITE 6				3. Date of Earliest Transaction (Month/Day/Year) 09/19/2012											
(Street)				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						
	HASSEE, I														
(City	)	(State)	(Zip)	Т	able I - N	on-D	erivative	Securities	s Acqu	uired, Disp	osed of, or l	Beneficiall	ly Owr	ied	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		if Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form:	7. Nature of Indirect Beneficial Ownership		
			(Month/Day/Year)	Code	· V	Amoun	(A) or (D)	Price	(msu. 3 and 4)				direct (	Instr. 4)	
Common	Stock		09/19/2012		A		100	A	\$ 0	24,825			D		
Common Stock									562		I		Custodian Stuart		
Common Stock								562			I		Custodian Lawson		
Reminder:	Report on a s	separate line fo		Derivative Securi	ties Acqu	Per cor the	rsons who ntained in form di	no respo n this fo splays a of, or Ber	rm ar curre	e not requently valid	ction of inf uired to res OMB con	spond un	less	SEC	1474 (9-02)
1 Title of	l <sub>2</sub>	3. Transactio		(e.g., puts, calls, w							Q Duina of	O Niversh	of	10.	11 Notum
Derivative Conversion		n Date Execution Da (Month/Day/Year) Execution Da any (Month/Day/		4. Transaction Code Year) (Instr. 8)	5. Number of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	and (M	d Expirati	ate Exercisable Expiration Date onth/Day/Year)		nount of derlying Security (Instr. 5) str. 3 and Security (Instr. 5) Security (Instr. 5) For Regular (Instr. 5)		Owned Following Reported	erivative curities eneficially whed Secu Dilowing eported ename action(s) (I)		Beneficia Ownershi (Instr. 4)
				Code V	(A) (I		te ercisable	Expiration Date	Tit	Amount or Number of Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DREW J EVERITT 250 JOHN KNOX ROAD, SUITE 6 TALLAHASSEE, FL 32303	X						

#### **Signatures**

/s/ J. Everitt Drew	09/21/2012

**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).

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.