FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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) Other (specify below)							
(Last) (First) (Middle) 250 JOHN KNOX ROAD, SUITE 6					3. Date of Earliest Transaction (Month/Day/Year) 05/30/2014												
(Street) TALLAHASSEE, FL 32303				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)		1	able I	- Nor	ı-Dei	rivative	Securities	s Acqu	ired, Dispo	osed of, or l	Beneficiall	ly Ow	ned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if any		Cod (Ins	Code (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form:		7. Nature of Indirect Beneficial Ownership				
			(Month/Day/Year)			ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)				direct (Instr. 4)	
Common	Stock		05/30/2014			4	A		100	A	\$ 0	25,525			D		
Commor	Stock											562			I		Custodian Stuart
Commor	Stock											562			I		Custodian Lawson
Reminder:	Report on a s	separate line fo		Derivat	ive Securi	ties A	cquire	Person con the	sons whatained if form disposed	no respo n this fo splays a	rm ard curre	e not requently valid	ction of inf iired to res OMB con	spond un	less	SEC	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	n 3A. Deemed Execution Da	ate, if T	Transaction Code	5. Num of	ber vative rities nired or osed 0) r. 3,	6. D and (Mo	expirationth/Day	cisable on Date	7. T Am Und Sec	Citle and count of derlying urities str. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy g	10. Ownersh Form of Derivatir Security Direct (I or Indire (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)

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	06/02/2014

**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.