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

(Print or Ty	pe Response	s)																		
1. Name and Address of Reporting Person* BENSE ALLAN G				CA	2. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director Officer (give title below) Other (specify below)							
(Last) (First) (Middle) 1405 W. BEACH DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/29/2014															
(Street)				4. If	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							
	A CITY, F		(7:)													•				
(City)	(State)	(Zip)			Ta	able I -	Non-	-De	erivative	Securit	ties A	cquir	ed, Dispo	osed of, or I	Benefici	ially Ow	ned		
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execut any	A. Deemed execution Date, if ny Month/Day/Year)		Code		(A) or Disposed of (D)			Ben Rep	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V		7	Amount	(A) or (D)	Price	e			(I) (Instr. 4)		Ì	(Ilisti. 4)		
Common	Stock		08/29/2014				A			100	A	\$ 0	8,1	15			D			
Common stock												300	300			I F		Bense Family Found Inc.	y ations,	
Reminder:	Report on a s	separate line	for each class of se		peneficiall			i c	Per cor the	rsons w ntained i form di	ho res in this splays	form a cu	are urren	not requ tly valid	ction of inf lired to res OMB conf	spond	unless	S	EC 147	74 (9-02)
		ı		(e.g.,]	puts, calls	, wa	arrants	s, opt	ion	ıs, convei	tible se	curit	ies)			1				
Security	2. Conversion or Exercise Price of Derivative Security	3. Transact Date (Month/Da	Execution any	ecution Date, if Transaction Number and Expiration Date			Amou Under Secur	mount of derlying security (Instr. 5) str. 3 and learning security (Instr. 5) learning security (Instr.		Deriva Securi Benefi Owned Follow Report	rities Forn ficially Deri ed Secu wing Dire- rted or In saction(s) (I)		n of vative urity: ct (D) adirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	V	(A)		Da Ex	ate ercisable	Expira Date	tion	Title	or Number of Shares						

Reporting Owners

B # 0 Y /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BENSE ALLAN G							
1405 W. BEACH DRIVE PANAMA CITY, FL 32401	X						

Signatures

/s/ Allan G. Bense	09/02/2014
**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.