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* CARROLL FREDERICK 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 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 2640 MITCHAM DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015												
(Street) TALLAHASSEE, FL 32308				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	1-Der	ivative S	Securitie	es Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year				(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial			
			(Month/Day/Year)			ode	V	Amoun	(A) or t (D)	Price	(Instr. 3 a	nstr. 3 and 4)		` /	Ownership (Instr. 4)	
Common	Stock		02/19/2015				A		1,133 (1)	A	\$ 15.44	29,994	(2)		D	
Common Stock											1,548 (3)		I	I	Held by 401(k) Plan	
Reminder:	Report on a s	separate line fo	or each class of secur					Pers cont the f	ons what ained in form dis	no respo n this fo splays a	orm are	e not requently valid	OMB con	formation spond unleading trol number	ess	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Ye	n 3A. Deemed Execution Da Year) any	(e.g., puts, calls, was 4. tte, if Transaction Code Year) (Instr. 8)		arrants, op 5.		and Expiration Date (Month/Day/Year)		7. T Am Und Sec (Ins 4)	Title and 8 nount of 1 derlying 5	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficial Ownersh (Instr. 4)	
				Со	de V	(A)	(D)	Date Exer		Expirati Date	Titl	e Number of Shares				

Reporting Owners

D 41 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
CARROLL FREDERICK III 2640 MITCHAM DRIVE TALLAHASSEE, FL 32308	X						

Signatures

/s/ Frederick Carroll, III	02/20/2015
**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) Represents restricted shares of Capital City Bank Group, Inc. common stock granted to the reporting person under the 2011 Associate Incentive Plan, which will vest on December 31, 2015, subject to the terms of the reporting person's Restricted Stock Award Agreement.
- (2) Includes 155 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP)
- (3) Includes 298 shares of common stock acquired through the Dividend Reinvestment Plan (DRIP)

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.