## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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												
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 Officer (give title below)  Check all applicable  Other (specify below)					
(Last) (First) (Middle) 2640 MITCHAM DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/21/2017												
(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)		T	able I	- Nor	ı-Der	ivative S	Securitie	es Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)			(Instr. 8)		(A) or Disposed of		of (D)	Beneficia Reported	nt of Securities lly Owned Following Transaction(s)		Ownership Form:	Beneficial		
			(Month/Day/Year)		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 a	ind 4)		` /	Ownership (Instr. 4)		
Common Stock		02/21/2017			1	A		819 (1		\$ 21.36	37,835 (2)		D			
Common Stock											1,552			I	Held by 401(k) Plan	
Reminder: 1	Report on a s	separate line fo	Table II.	rities benefic				Pers cont the f	sons wh tained in	o respo n this fo splays a	orm are	not requesting ntly valid	OMB conf	formation spond unle trol numbe	ess	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date	te, if Transaction Code		arrants, op 5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Ame Und Secu	itle and ount of lerlying urities tr. 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	Benefici Ownersh (Instr. 4)	
				Code	e V	(A)	(D)	Date Exer		Expiration Date	on Title	or Number of Shares				

### **Reporting Owners**

	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	02/22/2017		
**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, 2017, subject to the terms of the reporting person's Restricted Stock Award Agreement.
- (2) Includes 3316 shares purchased through DSPP (Director Stock Purchase Plan).

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.