## 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)																	
Name and Address of Reporting Person* BARRON THOMAS A				CAF	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						
(Last) (First) (Middle) P.O. BOX 900					3. Date of Earliest Transaction (Month/Day/Year) 06/26/2017										Treasu	irer			
(Street)				4. If <i>a</i>	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						
TALLAHASSEE, FL 32302 (City) (State) (Zip)					Table I - Non-Derivative Securities Acqui							d D:		D 61	II O				
1.Title of Security 2. Transaction (Instr. 3) Date		2. Transaction	Execution any	2A. Deemed Execution Date, if		3. Transacti Code (Instr. 8)		on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			d 5 D) E	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Owner Form:	rship In	direc enefi	cial	
						(Month/	Code	V	Amount	(A) or (D) Price			(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
Common	Stock		06/26/2017				G	V	540 (1)	D	\$ 0	1	27,717			D			
Common Stock 11/3		11/30/2017				S		4,000	D	\$ 25.1 (2)	7 1	123,717			D				
Common	Stock											5	516			I	4	01(k	)Plan
Common Stock											2	28,906			I	W	/ife-	Jane	
Common Stock											5	5,000			I		Trustee- Elizabeth		
Common Stock											4	4,500 I		Ι		Trustee- Rebecca			
Common Stock											4	,000			I		ruste	ee-	
Common Stock											2	2,000			I	M M R	1ettl	ehead	
Reminder:	Report on a	separate line	e for each class of sec	curities b	eneficial	ly o	owned di	P	ersons v	/ho re	spon	d to t	the collec	ction of inf	ormatic	on	SEC	: 1474	4 (9-02)
														ired to res					
			Table II						· •				ly Owned						
1. Title of Derivative Security (Instr. 3)		ce of rivative		d Date, if	4. 5 Transaction N Code o (Instr. 8) 5 A (Code o (Code		5. Number		nd Expiration Date Month/Day/Year)  A U S (I			7. Ti Amo Undo Secu			Derivative Securities Beneficially Owned Following		10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)		Beneficia
					Code	V	(A) (	1	Date Exercisable		iration	Title	Amount or Number of Shares						

D 41 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BARRON THOMAS A P.O. BOX 900	X		Treasurer				
TALLAHASSEE, FL 32302							

## **Signatures**

/s/Thomas A. Barron	12/04/2017
**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) Bona fide gift of shares which is exempt from Section 16(b) of the Exchange Act pursuant to Rule 16b-5.
- The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$25.09 to \$25.22. The reporting person undertake to
- (2) provide to Capital City Bank Group, Inc. ("CCBG"), any security holder of CCBG, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price.

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.