## 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

	pe Response												
Name and Address of Reporting Person*  Criser Marshall M 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) 7007 MCBRIDE PT.			3. Date of Earliest Transaction (Month/Day/Year) 02/07/2019										
(Street) TALLAHASSEE, FL 32312			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, is any (Month/Day/Year	(Instr. 8)	(A	4. Securities Acquire (A) or Disposed of ( (Instr. 3, 4 and 5)		Beneficia	t of Securities lly Owned Following Transaction(s) nd 4)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
					Code	V An	(A) or (D)	Price	e			or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		02/07/2019		P	2,:	500 A	\$ 24.3	3,309			D	
				Derivative Securit	ties Acquir	contain the forn	s who respo ed in this fo n displays a	orm ar	e not requently valid	uired to res	spond unle	ss	1474 (9-02)
T						/ 1	sed of, or Be	neficia	ny Owned				
1 Tid C	2			e.g., puts, calls, w	arrants, op	otions, con	vertible secu	ırities)	<u> </u>				
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security		n 3A. Deemed Execution Da any	te, if Transaction Code (Instr. 8)	arrants, op 5.	6. Date l and Exp (Month/		7. T Am Und Sec	•		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivatir Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)

### **Reporting Owners**

D ( O N (	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Criser Marshall M III 7007 MCBRIDE PT. TALLAHASSEE, FL 32312	X					

## **Signatures**

/s/Marshall M. Criser, III	02/07/2019
**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.