FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

1. Name and Address of Reporting Person * SAMPLE JOHN G JR				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)					
(Last) (First) (Middle) 3431 CEDAR HAMMOCK VIEW CT				3. Date of Earliest Transaction (Month/Day/Year) 02/19/2019							//Year)							
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							n/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
FORT MYERS, FL 33905 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						dired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Dany (Month/Day/			(Instr. 8)			4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following I Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership
					(IVIOI	nui/Day/	i cai		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)		()	(Instr. 4)	
Common	Stock		02/1	19/2019					A		956 <mark>(1</mark>		\$ 25.1	10,000	<u>(2)</u>		D	
				Table II - I					quire	the fo	orm dis	splays a	currer eficial	ntly valid	OMB conf	spond unle rol numbe		
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Yea		3A. Deemed Execution Date (ear) any		4. Transaction Code Year) (Instr. 8)		5. Number		and Expiration Date (Month/Day/Year)		7. Ti Amo Undo Secu	itle and ount of erlying irities rr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	(Instr. 4)	
										Date Exerc	eisable	Expiration Date	n Title	or Number of				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SAMPLE JOHN G JR 3431 CEDAR HAMMOCK VIEW CT FORT MYERS, FL 33905	X						

Signatures

/s/ John G. Sample, Jr.	02/21/2019
***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).
- (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, 2019, subject to the terms of the reporting person's Restricted Stock Award Agreement.
- (2) Includes 2278 shares purchased through DSPP (Director Stock Purchase Plan) which were exempt from the reporting and short-swing profit provisions of Section 16 of the Exchange Act.

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.