# 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

1. Name and Address of Reporting Person * Johnson Laura L				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) Other (specify below)						
(Last) (First) (Middle) 217 NORTH MONROE STREET					3. Date of Earliest Transaction (Month/Day/Year) 05/27/2021													
(Street) TALLAHASSEE, FL 32301				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 Acqui						Lired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execut any	Deemed cution Date, if	(Instr. 8)		tion	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ant of Securities ally Owned Following d Transaction(s)		Ownership Form:	Beneficial		
					(Month/Day/Year)			ode	V	Amoun	(A) or (D)	Price			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		05/2	7/2021				]	P		1,000	A	\$ 25.75	21,472	(1)		D	
				Table II - l					quire	the f	orm dis	splays a of, or Ber	curre	ntly valid lly Owned	OMB con	spond unle trol numbe		
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Year	Year)	3A. Deemed Execution Datear) any	4. Transaction Code Year) (Instr. 8)		5. 6. Number an		6. Da	nd Expiration Date Month/Day/Year)		7. T Ame Und Seco	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	Owners (Instr. 4	
										Date Exer	cisable	Expiratio Date	on Title	or Number of				

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Johnson Laura L 217 NORTH MONROE STREET TALLAHASSEE, FL 32301	X						

# **Signatures**

/s/Laura L. Johnson	05/27/2021
**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) Includes 605 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.