#### CAPITAL CITY BANK GROUP INC

Form 4

Stock

Stock

Stock

Common

Common

September 03, 2013

September	03, 2013												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549							COMMISSIO			ROVAL 3235-028	37		
Check if no lo subject Section		NGES IN	·	FICI		WNERSHIP O	Expir Estim	es:					
Form 4 or Form 5 obligations may continue. See Instruction 1(b).  Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								respo 4,	en hours onse		).5		
(Print or Typ	pe Responses)												
1. Name and Address of Reporting Person * HUMPHRESS JOHN KENT			Symbol CAPI	2. Issuer Name <b>and</b> Ticker or Trading Symbol CAPITAL CITY BANK GROUP				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)					
(Leat)	(First)	24:1412)	_	CCBG]	T - atio			· ·					
(Last)	(First)	(Middle)		e of Earliest ' n/Day/Year)		n		_X_ Director 10% Owner Officer (give title Other (specify					
HOLLAR	ORTH, HUMPHR & & KONRAD, P, ARK AVENUE		09/03/	•				below)	belo	ow)			
	(Street)			4. If Amendment, Date Original				6. Individual o		up Filing(	Check		
TALLAHASSEE, FL 32301				Month/Day/Ye	ear)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Ta	able I - Non	ı-Derivativ	ve Sec	urities A	cquired, Dispose	d of, or Ber	neficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if Transaction(A) or Code (Instr.					Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(Instr.		rect Benefici	
Common Stock	09/03/2013			Code V A	Amount 100		Price \$ 11.92	(Instr. 3 and 4) 33,269	D				
Common Stock								44,445	I	By H	umphres	s Family '	

Wadsworth, Humphress,

401(k) Plan FBO John K

I

I

315

13,661

By IRA

By

#### Edgar Filing: CAPITAL CITY BANK GROUP INC - Form 4

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9
Derivativ	e Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amount of		Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date Exercisable	Expiration Date	Title			
				Code V	(A) (D)						
				Code V	(A) (D)		*	Title	Number of Shares		

## **Reporting Owners**

Relationships

**Reporting Owner Name / Address** 

Director  $\frac{10\%}{\text{Owner}}$  Officer Other

HUMPHRESS JOHN KENT WADSWORTH, HUMPHRESS, HOLLAR & KONRAD, P 1040 EAST PARK AVENUE TALLAHASSEE, FL 32301

X

## **Signatures**

/s/ John K.

Humphress 09/03/2013

\*\*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.

Reporting Owners 2