#### CAPITAL CITY BANK GROUP INC

Form 4 July 12, 2016

#### FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

OMB 3235-0287 Number:

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 obligations may continue.

Check this box

if no longer

Section 16.

Form 4 or

subject to

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 See Instruction

1(b).

(Last)

(City)

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading **HUMPHRESS JOHN KENT** Symbol

(Zin)

5. Relationship of Reporting Person(s) to Issuer

CAPITAL CITY BANK GROUP INC [CCBG]

(Check all applicable)

(Middle) 3. Date of Earliest Transaction

(Month/Day/Year) 06/28/2016

\_X\_\_ Director 10% Owner Officer (give title Other (specify

WADSWORTH, HUMPHRESS, HOLLAR & KONRAD, P, 1040 EAST PARK AVENUE

(First)

(Street)

(State)

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

By

6. Individual or Joint/Group Filing(Check

13,864

I

TALLAHASSEE, FL 32301

(City)	(State)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security	2. Transaction Date (Month/Day/Year)		3. Transa	ransactionAcquired (A				5. Amount of Securities	6. Ownership	7. Nature of Indirect Beneficial (Instr. 4)		
(Instr. 3)		any (Month/Day/Year)	Code (Instr.		Disposed of (D) (Instr. 3, 4 and 5) (A) or		5)	Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)				
Common Stock	06/28/2016		Code G			( )	Price \$ 0	· · · · · · · · · · · · · · · · · · ·	I	By Humphress Family Tru		
Common Stock								39,265 <u>(1)</u>	D			
Common Stock								315	I	By IRA		

Wadsworth, Humphress, H

401(k) Plan FBO John K.

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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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration Date		Amou	nt of	Derivative	]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	5
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	J
	Derivative				Securities		(Instr.	3 and 4)		(	
	Security				Acquired						J
					(A) or						]
					Disposed						7
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date Expiration Exercisable Date	Expiration	m: .1	or		
								Number			
				~					of		
				Code V	(A) $(D)$				Shares		

## **Reporting Owners**

Relationships

Reporting Owner Name / Address

Director 10% Officer Other Owner

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

X

## **Signatures**

/s/ John K.

Humphress 07/01/2016
\*\*Signature of Date

Reporting Person

# **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 1458 shares purchased through DSPP (Director Stock Purchase Plan) which were exempt from the reporting and short-swing profit provisions of Section 16 of the Securities Act of 1933, as amended, pursuant to Rule 16a-3 promulgated thereunder.

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.

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