FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	OMB APPR	OVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	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).

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*  Hurford Jennifer M  (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol  LAKELAND FINANCIAL CORP [ LKFN ]  3. Date of Earliest Transaction (Month/Day/Year)  02/06/2024										k all app Direc	licable) tor er (give title		10% Ow Other (s below)	ner
LAKELAND FINANCIAL CORPORATION P.O. BOX 1387  (Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person  Form filed by Mars than One Person  The Person Check Applicable Check Ap				on	
WARSA	ARSAW IN 46581-1387													Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Nor	า-Deriva	tive S	Secu	rities	Acq	uired,	Disp	osed of	, or B	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,			Date,	3. Transaction Code (Instr. 8)  4. Securitie Disposed C 5)					4 and Securit		ies cially Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or P	Drice Tran		action(s) 3 and 4)				
Common Stock 02/06/2				2024				Α		338	A	\ <u> </u>	\$0 7		,459		D		
Common Stock															514			401(k) Plan	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Executive if any (Month/)		4. Transa Code ( 8)	Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities ired r osed : 3, 4	6. Date Expiration (Month/I	on Dai		3 and	int of rities rlying ative rity (Ins	De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

/s/ Becka J. Turnbow, Attorney-in-Fact

02/07/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.

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 Number.