FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL									
OWNERSHIP									

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average burden										
houre per reenonee	. 10									

Form 3 Holdings Reported.				OWNERSHIP								hours per response: 1.0					
X Form 4	Transactions	Reported.	Filed	d pursuant to So or Section 3								34					
1. Name and Address of Reporting Person* Pruitt Kristin				2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify					
(Last) LAKELA P.O. BOX		rst) (NCIAL CORPO	Middle) ORATION	3. Statemen 12/31/2022		Issuer's	s Fisc	al Year E	inded (Mo	onth/Da	ay/Year)	-	belov	,	Vice	belor Presider	,
(Street) WARSA (City)			46581-1387 Zip)	4. If Amendr	ment,	, Date o	of Orig	ginal File	d (Month/	Day/Ye	ear)	Line) <mark>〈</mark> Form	filed by C	one Re	ng (Checl porting Pe an One R	
4 TH 10			I - Non-Deriva		_		quire		•	-			-		T _a		7 National of
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			posea	5. Amount of Securities Beneficially Owned at e			rship : Direct	7. Nature of Indirect Beneficial Ownership	
				(MOHUI/Day/1ea	ai) 6	0)		Amoun	:	(A) or (D)	Price		Issuer's		Indire (Instr	ect (I)	(Instr. 4)
Common	Stock		11/08/2022			G		20	00	D	\$0		10,149		D		
Common Stock 09/12			09/12/2022			G		80	00	D	\$0		10,149		D		
Common Stock 12/31/2022					J4 ⁽¹⁾		3	5	A	\$75.57		9,180		I		401(k) Plan	
		Та	ble II - Derivat (e.g., p	ive Securit uts, calls, v									/ Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year f ive	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D (Inst	f Exp derivative decurities acquired A) or disposed		ate Exercisable and iration Date nth/Day/Year)		An Se Un De Se	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		p. Price of Derivative Security Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	ve es ally ng d tion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Benefic Owners (Instr. 4
					(A)	(D)	Date Exer) rcisable	Expiratio Date	n Tit	or Nun of	ount nber res					

Explanation of Responses:

1. Salary redirection and/or dividend reinvestment in 401(k) plan for 2022.

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

** Signature of Reporting Person

02/13/2023

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

- * 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.