## FORM 5

Check this box if no longer subject to

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

<b>ANNUAL STATEM</b>	ENT OF CHA	ANGES IN BE	NEFICIAL

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average b	ourden							

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3			Ovv	INEI	КЭНІ	Р				ho	urs per	response:	1.0			
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ac							
1. Name and Address of Reporting Person*  Ottinger Eric H			2. Issuer Name <b>and</b> Ticker or Trading Symbol  LAKELAND FINANCIAL CORP [ LKFN ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Executive Vice President							
(Last) (First) (Middle) LAKELAND FINANCIAL CORPORATION P.O. BOX 1387				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019											Year)	
(Street) WARSAV	V IN	4	6581-1387	4. If Amen	dment	t, Date o	of Orig	inal File	d (Month/D	ay/Yea			n filed by C	One Re	porting Pe	rson
(City)	(Sta		Zip)	rative Coo				ad Die	22222		Danafiai	ally Own	- d			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed S. Transa Code ( (Month/Day/Year)		ction	str.			or Disposed	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock 12		12/31/2019	J(1)		.)	Amoun		(D) A	Price \$45.73	4)	Year (Instr. 3 and 4) 2,690		r. 4) I	401)k) Plan		
	Common Stock 12/31/2019			J. 7					А	Ψ43.73		25,000		D	401)K) 1 lali	
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,										<u>'                                    </u>		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Execution Date, if any (Month/Day/Year)  Transaction Code (Instr. 8)  Transaction Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities ired r osed )	Expir	or Number			Amount of Number	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

1. Salary redirection to 401(k) plan for 2019.

Teresa A. Bartman, Attorneyin-Fact

02/06/2020

\*\* 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.