FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, B.C. 20045

STATEMENT	OF CHA	NGES IN B	ENEFICIAL	OWNERSHIP

OMB APPROVAL									
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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* FINDLAY DAVID M				2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					ner			
(Last) (First) (Middle) 2828 E. PRESTWICK RD				3. Date of Earliest Transaction (Month/Day/Year) 01/01/2017									X	below)				Jecliy			
(Street) WINONA LAKE IN 46590				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	state)	(Zip)												Person						
		Ta	ble I - Nor	ո-Deri	ivativ	/e Se	curitie	s A	cqı	uired,	Disp	osed of	, or Bei	nefici	ially	Owned					
		Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		·	3. Transaction Code (Instr. r) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securitie Benefici Owned F		s Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Pric	ce	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)		
Common Stock													10'		9,775		D				
Common Stock															21,732				l01(k) Plan		
Common Stock														3,000				By Spouse			
			Table II -									sed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3) 1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)			ate,		ransaction of Deriv) Secu Acqu (A) o Disp of (D			5. Number 6. D		S. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				(Code	v	(A)	(D)	Dat Exe	te ercisable		piration te	Title	Amo or Num of Shar	ber						
Restricted Stock Units ⁽¹⁾	\$0 ⁽²⁾	01/01/2017			A		16,200		02.	/01/2020	02	/01/2020 ⁽³⁾	Common Stock	16,2	200	\$0	16,20	0	D		
Restricted Stock Units ⁽¹⁾	\$0 ⁽²⁾								02	/01/2017	02	/01/2017 ⁽³⁾	Common Stock	18,0	000		18,00	0	D		
Restricted Stock Units ⁽¹⁾	\$0 ⁽²⁾								02	/01/2018	02	/01/2018 ⁽³⁾	Common Stock	18,0	000		18,00	0	D		
Restricted Stock Units ⁽¹⁾	\$0 ⁽²⁾								02	/01/2019	02	/01/2019 ⁽³⁾	Common Stock	18,0	000	_	18,00	0	D		

Explanation of Responses:

- 1. The Restricted Stock Units are subject to forfeiture based on corporate performance criteria.
- 2. Each Restricted Stock Unit exercises into 1 share of Common Stock.
- 3. Restricted Stock Unit awards are a conditional promise to transfer a share at a specific futurue date and do not have an expiration date.

<u>Teresa A. Bartman, Attorney-in-Fact</u>
<u>01/03/2017</u>

** Signature of Reporting Person

Date

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.