FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* Lahrman Brok A | | | | | | 2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN] | | | | | | | | 5. Relationship of Repo (Check all applicable) Director X Officer (give ti | | | 10% Own Other (sp | | wner | |
|---|--|-----------------|-------|---|-------|---|--|---|--|--------|--|----------------|--|---|--|---|--------------------|---------------------------------------|----------------|--|
| (Last) P.O. BO | • | rirst) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/02/2022 | | | | | | | | SVP, Chief Accounting Offi | | | | below) | er | |
| (Street) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Individual or Joint/Group Filing (Check Applicableine) X Form filed by One Reporting Person | | | | | |
| WARSA | | | 46581 | | | | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | | Zip) | an Darive | 41112 | | wisi o o | | ! | J D: | | D | onofic | الماد | . 0 | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/ | | | on | n 2A. Deemed Execution Date, | | | 3. | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | r 5. Amount of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transa | Transaction(s) (Instr. 3 and 4) | | | (11341. 4) | |
| Common Stock 08/02/20 | | | | |)22 | 22 | | | S | | 250 | D | \$74.9 | 514 | | 900 | | D | | |
| Common Stock | | | | | | | | | | | | | | | 482 | | | | 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) | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exer Expiration D (Month/Day/ | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | Der Sec (Ins | Price of ivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership Form: | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

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

08/03/2022

** Signature of Reporting Person Date

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

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.

^{*} 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).