FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response	: 0.5								

	tion 1(b).	nuc. See		Filed							es Exchangen Sany Act of		f 193	4		nours	per re	sponse:	0.5
1. Name and Address of Reporting Person* <u>KUBACKI MICHAEL L</u>					2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [ LKFN								ck all app Direc	nship of Reporti applicable) Director		10% O			
(Last) (First) (Middle)  LAKELAND FINANCIAL CORPORATION P.O. BOX 1387						3. Date of Earliest Transaction (Month/Day/Year) 07/13/2021									Office below	er (give title		Other (s	specify
(Street) WARSA (City)	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 More than One Reporting Person										
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or B	ene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution D		Date,	3. Transaction Code (Instr. 8)					Securit Benefic	Amount of curities eneficially when Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount (A) or (D)		or	Price	Transaction(s) (Instr. 3 and 4)				(111301.4)	
Common	Stock			07/13/	2021				A		650	A		\$ <mark>0</mark>	D 182,067 D				
Common	Stock														1 1.000 1 1 1				By Spouse
		Tal									osed of, o				Owne	t			
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)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Str.	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
									Date Exercisa	able	Expiration Date	Title	or Num of Shar	ber					

**Explanation of Responses:** 

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

07/15/2021

\*\* Signature of Reporting Person Date

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

Code V

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.

(A) (D)

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).