SEC Form 4

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FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tions may conti tion 1(b).	nue. See		File								es Exchan npany Act		1934			hours	per res	sponse:	0.5	
1. Name and Address of Reporting Person* Ottinger Eric H (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol <u>LAKELAND FINANCIAL CORP</u> [LKFN] 3. Date of Earliest Transaction (Month/Day/Year)										. Relationship of Reportin Check all applicable) Director X Officer (give title below)		10% Ow Other (s below)	ner	
12133 EAGLE CREEK PLACE							01/30/2015										Executive Vice President				
(Street) FORT WAYNE IN 46814					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)		Person																			
		Ta	ble I - Nor	1-Deriv	/ativ	/e Se	ecuri	ities A	Acqu	uired,	Dis	posed o	f, or Be	enefic	cially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D							2A. Deemed Execution Dat if any (Month/Day/Ye		,	3. Transad Code (I 8)	ction Dispose		ties Acquired (A) d Of (D) (Instr. 3, 4				s Illy ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership Instr. 4)	
										Code	v	Amount	(A) a (D)	^r Pri	ice	Transacti (Instr. 3 a	on(s)			iiisu. 4)	
Common Stock 01/30						15				М		4,480	30 A		\$ <mark>0</mark>	14,484			D		
Common Stock 01/30					0/201	15				F		1,411	1,411 D		37.74	13,073			D		
Common Stock																1,575				401)k) Plan	
			Table II -									osed of, onvertil				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	ransa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)			le and of Securitie: Underlying Derivative S (Instr. 3 and		ities ng re Secu		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)) Beneficial Ownership ct (Instr. 4)	
				c	code	v	(A)	(D)	Dat	e ercisable	Exp	piration te	Title	Amo or Num of Shai	nber						
Restricted Stock Units ⁽¹⁾	(2)	01/30/2015			М			4,480	02/	/01/2015	02/	01/2015 ⁽³⁾	Commor Stock	4,48	80 ⁽⁴⁾	\$0	0		D		
Restricted Stock Units ⁽¹⁾	\$0 ⁽²⁾								02/	/01/2016	02/	01/2016 ⁽³⁾	Common Stock	4,0	000		4,000)	D		

02/01/2017

02/01/2018

10/11/2010

05/14/2013

Explanation of Responses:

\$0⁽²⁾

\$0⁽²⁾

\$19.595

\$24.05

Restricted Stock Units⁽¹⁾

Restricted

Stock

Units⁽¹⁾ Stock Options

(Right to

(Right to

Buy)

Buy) Stock Options

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.

4. Shares adjusted due to performance criteria.

Teresa A. Bartman, Attorneyin-Fact

Commor

Stock

Commor

Stock

Common

Stock

Common

Stock

4,000

4,000

500

3.000

02/01/2017⁽³⁾

02/01/2018(3)

10/11/2015

05/14/2018

02/02/2015

4,000

4,000

500

3,000

D

D

D

D

** 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.