FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| obligations may continue. See Instruction 1(b). File | | | | | | d pursuant to Section 16(a) of the Securities Exchange Act of 1934 | | | | | | | | | hou | rs per re | sponse: | 0.5 |
|---|---|---|---|---|--|---|-------------------------------|---------|--|------|--------------------------------------|--|--|--------------|--|--|---|-------|
| 1. Name and Address of Reporting Person* PICHON EMILY E | | | | | | or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN] | | | | | | | | heck all app | tionship of Report all applicable) Director Officer (give title | | rson(s) to Is 10% O Other (| Owner |
| (Last) (First) (Middle) LAKELAND FINANCIAL CORPORATION P.O. BOX 1387 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/10/2018 | | | | | | | | | below) | | below) | | | |
| (Street) WARSA | Street) WARSAW IN 46581-1387 | | | 37 | 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 | | | | | |
| (City) | (5) | | (Zip) | n-Deriv | ative Se | curities A | cau | iired. | Disr | osed | of. o | r Ben | eficia | llv Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date | | | | | | te, | 3. Transa Code (I 8) | ction | 4. Securities Disposed Of | | Acquired (A) or (D) (Instr. 3, 4 and | | 5. Amo Securit Benefic Owned Reporte | 5. Amount of | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock 07/10 | | | | |)/2018 | | | A 650 A | | \$0 | 15 | 15,863 | | D | | | | |
| | | Т | | | | urities Acc s, warrant | | | | | | | | / Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any | | 4. Fransactior Code (Instr. 3) | | Exp | Date Exercisable and cpiration Date lonth/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) 8. Price of Derivative Securitie Beneficia Owned Following | | es ally | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

(1)

Phantom Stock

- 1. Each phantom stock unit exersises into 1 share of Common Stock.
- 2. Phantom stock is exercisable after the directors' retirement as a Board member.
- 3. Phantom shares expire after the directors' retirement as a Board member.

Teresa A. Bartman, Attorney-

Amount or Number

Shares

766

07/11/2018

in-Fact

Title

Common Stock

** Signature of Reporting Person

Date

Transaction(s) (Instr. 4)

766

D

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.

Acquired
(A) or
Disposed

of (D) (Instr. 3, 4

(D)

Date Exercisable

(2)

Expiration

(3)

Date

and 5)

(A)

ν

Code