FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |

0.5

hours per response:

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

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* KUBACKI MICHAEL L | | | | | | 2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN] | | | | | | | | | | elationship ck all appli | able) | Reporting Person(s) to Issuer ble) 10% Owner | | | |
|---|---|--|---|-----------------|----------------|--|---|---------------|--------------|-----------------------------------|---------------|---|---|-----------------------------------|----------------|--|--|---|--|--|--|
| (Last) 1401 E. | (F NORTH SH | • | (Middle) | | | Date (./10/2 | | est Tra | ansac | ction (Mo | nth/D | ay/Year) | | Officer below) | (give title | | Other (s below) | pecify | | | |
| (Street) | YRACUSE IN 46567 | | | | | 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) | (S | | (Zip) | | <u> </u> | | • • • | | | | | | | | <u> </u> | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | nsaction | n | 2A. Deemed Execution Date, if any (Month/Day/Year | | ıte, | 3. Transa Code (I 8) | ction | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | A) or | 5. Amou Securitie Benefici Owned F | nt of s ally following | Form (D) o | : Direct I r Indirect I str. 4) (| 7. Nature of ndirect Beneficial Ownership | |
| | | | | | | | | | v | Amount | (A) (D) | or | Price | Reported Transact (Instr. 3 | ion(s) | | 1 | Instr. 4) | | | |
| Common | Stock | 10/201 | /2017 | | | | A | | 844 | A | 1 | \$ <mark>0</mark> | 238 | ,601 | | D | | | | | |
| Common | | | | | | | | | | | 39,064 | | | | 401(k) Plan | | | | | | |
| | | | Table II - | Deriv (e.g., | ative puts, | Sec call | uritie s, wa | s Ac ırran | qui ts, c | red, D option | ispo s, co | sed of, onvertil | or Be | nefic | cially ies) | Owned | | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | | Transaction Code (Instr. | | | | ate Exer iration D nth/Day/ | ate | e and | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e (Ces Fally [Ces General Ces | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exe | e rcisable | Exp | iration e | Title | or No | lumber | | | | | | |
| Restricted Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | | | | | | | | 02/ | 01/2017 | 02/0 | 01/2017 ⁽³⁾ | Commo Stock | n 18 | 8,000 | | 18,00 | 0 | D | | |
| Restricted Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | | | | | | | | 02/ | 01/2018 | 02/0 | 01/2018 ⁽³⁾ | Commo Stock | n 18 | 8,000 | | 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.

Teresa A. Bartman, Attorneyin-Fact

01/11/2017

** 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.