FORM 5

Form 3 Holdings Reported.

Form 4 Transactions Reported

Check this box to indicate that a

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington.	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0362 Estimated average burden hours per response: 1.0

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Common Stock Common Stock				J ⁽¹⁾	4 ed, Disp	Amount (A) 497 Disposed of,			Issuer's Fiscal Year (Instr. 3 and 4) 2,938 3,474 ally Owned		D (Indirect (I) (Instr. 4)		(Instr. 4) 401(k) Plan		
1. Title of Security (Instr. 3) 2. Tr			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	3. Transacti Code (Ins	4. Secu	ed, Disposed of, or Benef 4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			5. Amo Securit Benefic	unt of ies cially at end of	6. Owners Form: D (D) or	hip Ind irect Be Ow	Nature of lirect neficial wnership	
(City)	(Sta	ate) (Zip)	Form filed by More than One Reporting Person							oπing				
(Street) WARSAW IN			46581-1387	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					
(Last) (First) (P.O. BOX 1387		Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2023					//Year)	X below) below) Senior Vice President						
Name and Address of Reporting Person* Leniski Stephanie R				2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Director Difficer (give title Other (specify below)					

Explanation of Responses:

1. Salary redirection and/or dividend reinvestment in 401(k) plan for 2023.

/s/ Becka J. Turnbow, 02/14/2024 Attorney-in-Fact

** Signature of Reporting Person

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.