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 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

	tion 1(b).	100. 300	F						es Exchang npany Act o					hours	s per re	esponse:	0.5
1. Name and Address of Reporting Person [*] Abbasi Faraz					2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]								ionship of Reporting Po all applicable) Director			10% O	Owner (specify
(Last) P.O. BO2	(Last) (First) (Middle) P.O. BOX 1387				3. Date of Earliest Transaction (Month/Day/Year) 01/11/2022							Officer (give title below)		Other (below)			
(Street) WARSAW IN 46581				4. If A	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					on	
(City)	(St	ate) (Z	Zip)										Form Perso	filed by Mo on	ore tha	In One Rep	orting
		Table	I - Non-Der	ivative S	Secur	rities Ac	quired,	Dis	posed of	, or E	Benefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			nsaction h/Day/Year)	Execution Date,		Code	Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5)				3, 4 and Securit Benefic Owned		ties Fo cially (D Following (I)		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	or Pri	~~ ·	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 01/11/				11/2022	/2022		A		650	I	A :	\$ <mark>0</mark>) 650			D	
		Tal	ole II - Deriv (e.g.,						osed of, onvertib				wne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exe (Month/Day/Year) if an	3A. Deemed Execution Date if any (Month/Day/Yea	Code (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)			Secu Unde Deriv	unt of rities rlying ative rity (Instr I 4)	Deriv Secu (Inst	Price of erivative ecurity 1str. 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 Ownershij t (Instr. 4)
											Amoun or Numbe						

Date Exercisable Expiration Date

Explanation of Responses:

<u>/s/ Becka J. Turnbow,</u> <u>Attorney-in-Fact</u>

Title

of Shares

01/14/2022

** 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).

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)