## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

| OMB APPROVAL        |           |  |  |  |  |  |
|---------------------|-----------|--|--|--|--|--|
| OMB Number:         | 3235-0362 |  |  |  |  |  |
| Estimated average b | ourden    |  |  |  |  |  |

| Section obligation Instruction                      | 16. Form 4 or lons may continuion 1(b).  Holdings Repo                           | Form 5<br>ue. See                          | ANNUA   | _ STATEMENT OF CHANGES IN BENEFI<br>OWNERSHIP   |   |                        |   |            |   |  | ENEFIC                                     | IAL   |  |   | mber:<br>d average bu<br>r response:               | 3235-0362<br>rden<br>1.0 |
|---|--|--|---|---|---|------------------------|---|------------|---|--|--|---|--|---|--|--------------------------|
| Form 4  | Transactions R   | eported.                                   | File  | ed pursuant to<br>or Sectior  |   |                        |   |            | ities Excha<br>ompany Ad  |  |  |   |  |   |  |                          |
| Pruitt K (Last)                                     | ristin<br>(Fir   | Reporting Person* st) (NCIAL CORPOR        | Middle)<br>RATION   | Issuer Name and Ticker or Trading Symbol     LAKELAND FINANCIAL CORP [ LKFN ]      Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019 |   |                        |   |            | KFN ]   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Executive Vice President |  |   |  |   |  |                          |
| (Street) WARSAV                                     | V IN   |  | 6581-1387<br>Zip)   | 4. If Amen  | 4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Application)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person |                        |   |            |   |  |  |   |  | rson  |  |                          |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |   |   |   |                        |   |            |   |  |  |   |  |   |  |                          |
| 1. Title of Security (Instr. 3)                     |  | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | Code (Instr.  |                        |   |            |   | or Disposed  | Secu<br>Bene                               | ount of<br>ities<br>icially<br>d at end o           | For  | vnership    <br>rm: Direct  | 7. Nature of<br>ndirect<br>Beneficial<br>Dwnership |                          |
|   |  |  |   | (Month/Day/Year)  |   | ai) o)                 |   | Amount     |   | (A) or<br>(D)  | Price                                      | Issue   | Issuer's Fiscal<br>Year (Instr. 3 and                |   |  | (Instr. 4)               |
| Common  | Stock  |  | 11/15/2019  |   |   | G                      | +   | 4          | 30  | D  | \$0  | 7,064 D   |  |   |  |                          |
| Common  | Stock  |  | 12/31/2019  |   |   | <b>J</b> <sup>(1</sup> | 1)  | 412 A \$45 |   |  | \$45.73                                    | 8,178   |  |   | I  | 401(k) Plan              |
|   |  | Та   | ble II - Derivat<br>(e.g., p                                | ive Secur<br>uts, calls,  |   |                        |   |            |   |  |  |   | d  |   |  |                          |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security            | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8)   | str. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  Expir. (Mont   |                        | Date Exercisable and Expiration Date Month/Day/Year)  Date Expiration Date Expiration |            | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)  Amoun or Numb of Title Share |  | 8. Price of Derivative Security (Instr. 5) | deriva<br>Secur<br>Benef<br>Owne<br>Follov<br>Repoi | rities<br>ficially<br>d<br>wing<br>rted<br>action(s) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4 | Beneficial<br>Ownership<br>(Instr. 4)              |                          |

## **Explanation of Responses:**

1. Salary redirection to 401(k) plan for 2019.

Teresa A. Bartman, Attorneyin-Fact

02/06/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.