## FORM 5

Form 3 Holdings Reported.

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

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Form 4	1 Transactions	Reported.	Fi	led pursuant or Secti					curities Excha Company Ac			34						
Name and Address of Reporting Person*     Donovan James Rickard					2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [ LKFN ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director						
(Last)	,	First)	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020							7	X Officer (give title below) Other (specify below)  SVP, General Counsel					ecily
(Street) WARSA			46581-1387	4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	ndividual or Joint/Group Filing (Check Applicable 2)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Tran		2. Transaction	2A. Deeme	d Date,	3. Trar Cod		4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)					_	of ly		Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership	
			(MOHIII/Day	(real) b)			Amount		(A) or (D)	Price	e	Issuer's Fiscal Year (Instr. 3 and 4)		Indired (Instr.	ct (I)			
Common Stock 12/31/20			12/31/2020				<b>J</b> (1)		20		\$45.13		1,020		I		401(k) Plan	
Common Stock												0	)		)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	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)		Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefic Owned Followin Reporte Transac (Instr. 4)	ve es ially ng ed etion(s)	10. Owners Form: Direct (I or Indire (I) (Instr	hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercisa	able	Expiration Date	Title		Amount or Number of Shares						
Restricted Stock Units	\$0 <sup>(2)</sup>						01/02/20	021	01/31/2021 <sup>(3</sup>	Com		3,000		3,0	00	D	$ \top $	

## **Explanation of Responses:**

**\$0**<sup>(2)</sup>

\$0<sup>(2)</sup>

Restricted

Restricted

Units<sup>(4)</sup>

Stock Units<sup>(4)</sup>

- 1. Salary redirection and/or dividend reinvestment in 401(k) plan for 2020.
- 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.
- ${\bf 4.\ The\ Restricted\ Stock\ Units\ are\ subject\ to\ for feiture\ based\ on\ corporate\ performance\ criteria.}$

Teresa A. Bartman, Attorney-

4,050

4,050

Stock

Stock

02/09/2021

4,050

4,050

D

D

in-Fact

02/01/2022(3)

02/01/2023(3)

01/01/2022

02/01/2023

\*\* Signature of Reporting Person D

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.