FORM 5

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 |
|----------------|------|-------|
| vvasiliigtoii, | D.C. | 20070 |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Form 3 Holdings Reported.

Instruction 1(b)

| Form 4 | Transactions F | Reported. | File | ed pursuant to or Sectior | | | | | ities Excha ompany Ad | | | | | | | | |
|--|---|--|---|--|---|--|--|---|--------------------------|---|---|------------|---|---|-----------|---|--|
| 1. Name and Address of Reporting Person* <u>Lahrman Brok A</u> | | | | 2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN] | | | | | | | Che | ck all apr | • | | 10% | o Issuer 6 Owner er (specify | |
| (Last) | (Fir | st) (I | Middle) | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019 | | | | | | /Year) | X | belov | er (specify ow) ficer | | | | |
| (Street) WARSAV (City) | | | 16581 Zip) | 4. If Amen | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | _ine) | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. r) 8) | | 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5) | | | or Disposed | Securit Benefic Owned | | ies Over ially For at end of (D | | r | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Amour | nt | (A) or (D) | Price | | Issuer's Fiscal Year (Instr. 3 ar 4) | | | | (Instr. 4) |
| Common Stock | | | 12/31/2019 | J (1 | | l) | 3 | 62 | A | A \$45.73 | | 3 362 | | | I | 401(k) Plan | |
| 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) | of Deriv Secu Acqu (A) o Dispo of (D (Instrand ! | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate Exercisable and ration Date hth/Day/Year) | | Amo Secu Unde Deriv Secu and | le and unt of rities ritying rative rity (Instr. 3 4) Amount or Number of Shares | nt er | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | s Illy | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership ct (Instr. 4) |

Explanation of Responses:

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

Teresa A. Bartman, Attorney-

in-Fact

** Signature of Reporting Person

Date

02/06/2020

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.