FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL										
OMB Number:	3235-0287									

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

UIVID APP	KOVAL
OMB Number:	3235-0287
Estimated average b	urden
hours per response:	0.5
	OMB Number: Estimated average b

1. Name and Address of Reporting Person*  WELCH M SCOTT						2. Issuer Name and Ticker or Trading Symbol  LAKELAND FINANCIAL CORP [ LKFN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) 6 LONGWOOD COURT					3. Date of Earliest Transaction (Month/Day/Year) 11/07/2024									Office below	er (give t v)	itle	Oth belo	er (specify w)	
(Street) ELKHART IN 46516 (City) (State) (Zip)				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person     Form filed by More than One Reporting Person						
			I - No					Ac	quire	d, Di	sposed of	, or E	Benefici	ally Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Ac Disposed Of (D) and 5)					5. Amount of Securities Beneficially Owned Follo		Form: D (D) or In		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transaction/s				(50. 7)	
Common Stock 11/07/202					24			G		1,355	D	\$0	23,645		I By Con		By Corporation		
		Tal	ble II								posed of, convertib				d	,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Yea		Execu	xecution Date, any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exe ation I th/Day		7. Title Amou Secur Under Deriva Secur 3 and	int of ities rlying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	Beneficia Ownersh ct (Instr. 4)	
					Code	Code V		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	r					

**Explanation of Responses:** 

Remarks:

/s/ Becka J. Turnbow, Attorney-in-Fact

11/08/2024

\*\* 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).

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.