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

Machinatan	D C	20540
Washington,	D.C.	20549

Washington, D.	C. 20549
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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average burden										

Instructi	ion 1(b). Holdings Repo	rted.	OWNERSHIP										- 11	Estimated average burde hours per response:		den 1.0
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ad							
Name and Address of Reporting Person* O'Neill Lisa M				2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]							Check all ap Dire	plicable) ctor er (give tit	109		Owner r (specify	
(Last) (First) (Middle) LAKELAND FINANCIAL CORPORATION P.O. BOX 1387				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019						/Year)	below) below) EVP & CFO					
(Street) WARSAV	V IN		6581-1387 Zip)	4. If Amen	dment	, Date o	of Orig	jinal File	d (Month/[Day/Yea			n filed by 0	One Re	ing (Check eporting Pe aan One Re	rson
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed	of, or	Benefici	ally Own	ed			
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securit Benefic	ies		vnership rm: Direct	7. Nature of Indirect Beneficial	
			(Monthibay)	y/Year) 8)			Amour	nt	(A) or (D)	Price	Issuer's			ect (I)	Ownership (Instr. 4)	
Common	ommon Stock		12/31/2019			J ⁽¹⁾		3	80	A \$45.		3 23,178			D	
Common	Stock	ock 12/31/2019 J ⁽²⁾ 444 A \$ 45.73 1,5				1,593		I .	401(k) Plan							
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,								y Owned				
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)	n of Expi		5. Date Exercisable and Expiration Date Month/Day/Year) Date Expiration		Amor Secu Unde Deriv Secu and 4	rity (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Numbo derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	ve es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Dividend reinvestment for 2019.
- 2. 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.

- * 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.