FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

to Section obligat	this box if no lotion 16. Form 4 ions may contintion 1(b).	or Form 5	STA		l pursua	ant to S	Section	16(a) of the	Securi	NEFICIA ities Exchang ompany Act o	e Act o		RSHIP	Estim		er: 3 verage burde sponse:	3235-0287 en 0.5
Name and Address of Reporting Person* Steiner Jonathan P					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 X Officer (give title Other (specify				vner
(Last) (First) (Middle) LAKELAND FINANCIAL CORPORATION P.O. BOX 1387				3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022									Senior Vice President					
(Street) WARSA	W IN		l6581-	-1387							ne) X Forn Forn	′						
(City)	(St	, ,	Zip) 	on Deriva	tive 9	Secui	ritios	Λ	nuire	N Die	enosed of	or B	enefic	ially Owr	ned.			
Date			2. Transacti	on 2A. Deemed Execution Date		ıte,	3.		4. Securities	ies Acquired (A) o Of (D) (Instr. 3, 4 a		5. Am Secur Bener Owne Repo	5. Amount of		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	Stock			02/15/20)22				S		1,866	D	\$82.1	- `	1,013	' 		
Common	Stock													6,039 I 401(k) Plan				` '
		Tal	ble II								oosed of, convertib				d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		ution Date,	Code (Instr.		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)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	of Shares					

Explanation of Responses:

/s/ Matt VanDeWielle, Attorney-in-Fact

** Signature of Reporting Person Date

02/15/2022

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

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.

^{*} 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).