#### Edgar Filing: CAPITAL CITY BANK GROUP INC - Form 4

Form 4 June 03, 20 <b>FORN</b> Check t if no lot subject	M 4 UNITED	) STATES	S SECU Wa	ashingtor NGES IN	n, D.C. 2 N BENE	20549 2FICI	9	E COMMISS DWNERSHIP	POF E	OMB Number: Expires: Estimated	average	0287
Section Form 4 Form 5 obligati may col <i>See</i> Inst 1(b).	or Filed pu										urs per 	0.5
(Print or Type	Responses)											
HUMPHRESS JOHN KENT Symbol CAPI				Ier Name ar ΓAL CIT CCBG]		-	Issuer	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) WADSWO HOLLAR EAST PAR	3. Date of	te of Earliest Transaction th/Day/Year)				XDirector10% Owner Officer (give titleOther (specify below) below)						
TALLAH		(Month/Day/Year) Applicable Line) _X_ Form filed by					Line) led by One	oint/Group Filing(Check One Reporting Person More than One Reporting				
(City)	(State)	I (Zip)	The second se			9	.,.	Person		D (1)		
	, , , , , , , , , , , , , , , , , , ,							Acquired, Dispo			-	
1.1 title of Security (Instr. 3)	• • • •			Transactio Code	Disposed	l (A) o l of (D	or ))	BeneficiallyForm:OwnedDirectFollowingor IndReported(I)Transaction(s)(Instr.		nership (Instr. 4) n: ct (D) ndirect		rect Beneficiary
Common	05/31/2013			Code V A	Amount 100	(D) A	Price \$ 0	(Instr. 3 and 4) 33,169	D			
Stock	03/31/2013			Λ	100	Л	ψυ	33,102	D			
Common Stock								44,445	Ι	By H	Humphres	s Family Tru
Common Stock								315	Ι	By I	RA	
Common Stock								13,661	Ι			umphress,Ho BO John K. l

**Reporting Owners** 

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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)	4. Transacti Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

### **Reporting Owners**

	Relationships					
<b>Reporting Owner Name / Address</b>	Director	10% Owner	Officer	Other		
HUMPHRESS JOHN KENT WADSWORTH, HUMPHRESS, HOLLAR & KONRAD, P 1040 EAST PARK AVENUE TALLAHASSEE, FL 32301	Х					
Signatures						

## Sig

\*\*Signature of

Reporting Person

/s/ John K. Humphress 05/31/2013

Date

# **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.