Edgar Filing: BARRON THOMAS A - Form 4/A

BARRON 7	THOMAS A										
Form 4/A											
June 26, 201	12										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287		
	Check this box						Expires:	January 31,			
if no lon subject t		MENT O	F CHAN	IGES IN	BENE	FICL	AL OWN	ERSHIP OF	Estimated average 2005		
Section 16. SECURITIES								burden hours per			
	Form 4 or							response	. 0.5		
Form 5	n n -						-	Act of 1934,			
obligation may con				•	•	-	•	1935 or Section			
See Insti		30(h)	of the Ir	nvestmen	t Compa	ny A	ct of 1940)			
1(b).											
(Drint on Type)	Deemongee										
(Print or Type	Kesponses)										
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Pers	on(s) to			
BARRON '	Symbol	a realite an	u Hekel 0	i iiau	8	Issuer					
		CAPITAL CITY BANK GROUP INC [CCBG]					(Check all applicable)				
(Last)	(First) (Middle)	-	-	honcostion			X Director	10%	Owner	
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X Officer (give title Other (specify			
P.O. BOX 900			05/05/2011					below) below)			
1101 2011								Treasurer			
	(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			•					Applicable Line) _X_ Form filed by One Reporting Person			
TATIATIA	CCEE EL 20202		05/06/2	2011				Form filed by Mo			
IALLAHA	SSEE, FL 32302							Person			
(City)	(State)	(Zip)	Tab	le I - Non-J	Derivative	e Secu	rities Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deem	ned	Code (Instr. 3, 4 and 5)				5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if					Securities	Ownership	Indirect	
(Instr. 3)		any (Month/D	av/Vear)					Owned D	Form: Direct (D)	Beneficial Ownership	
			ay/1cal)						or Indirect	(Instr. 4)	
						(1)		Reported	(I)	× ,	
						(A) or		Transaction(s)	(Instr. 4)		
				Code V	Amount		Price	(Instr. 3 and 4)			
Common	05/05/2011			S	2,500	D	\$	151 851	D		
Stock	05/05/2011			3	(1)	D	10.8272	151,851	D		
Common					2,000		\$				
Stock	05/05/2011			S	(2)	D	ф 11.0015	149,851	D		
Stock					_		11.0015				

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

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 control number.

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	5	Relationships						
1 8	Director	10% Owner	Officer	Other				
BARRON THOMAS A P.O. BOX 900 TALLAHASSEE, FL 32302	Х		Treasurer					
Signatures								
/s/ Thomas A.	6/25/2012							

**Signature of Reporting Person

Barron

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).

(1) Transaction previously reported in error as a sale of 6,800 shares of common stock

(2) Transaction previously reported in error as a sale of 200 shares of common stock

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.