Instruction 1(b).

FORM 4

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	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours per response: 0										

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

1. Name and Address of Reporting Person* <u>Gable Robert Blakeslee</u>					2. Issuer Name and Ticker or Trading Symbol CTO Realty Growth, Inc. [ CTO ]									o of Reportir licable) tor	ng Per	rson(s) to Is			
(Last)	(Fir	est) (N	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024								Office	er (give title v)		Other (s below)	pecify	
1140 N. WILLIAMSON BLVD. SUITE 140					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person					·
(Street) DAYTO	DAYTONA FI 32114			Form filed by More than One Reporting Person									orting						
(City)	(St	ate) (Z	Zip)		$ _{\square}$	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							ided to						
		Table	I - N	Non-Deriva	tive	Secu	rities	Ac	quir	ed, Dis	sposed o	of, or l	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye			Execution		on Date, T		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			nd 5) Secu Bene Own		rities For For Formal F		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	V	mount	(A) or (D)	Price	Tran		orted (Insusaction(s) tr. 3 and 4)		1. 4)	msu. 4)
Common	Stock			04/01/202	24			A			1,130	A	\$16.862	5.8625(1)		(1) 36,935		D	
		Tal	ble I	II - Derivati (e.g., ρι							osed of converti				)wne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if an	Deemed cution Date, ny nth/Day/Year)	4. Transa Code 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	Expiration Date (Month/Day/Year) S:			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable	Expiration Date	1 Title	Amount or Number of Shares						

## **Explanation of Responses:**

1. These shares were issued to the Reporting Person in lieu of his 1st quarter 2024 board retainer fee of \$12,500 and committee retainer fees of \$6,562.50 pursuant to the Issuer's Non-Employee Director Compensation Policy (the "Policy") adopted by the Issuer's board of directors on February 27, 2019 (last amended February 14, 2024). Pursuant to the Policy, the share price utilized to calculate the number of shares issued was the 20-day trailing average closing price as of the last day of the quarter, or \$16.8625.

/s/ Daniel E. Smith, attorneyin-fact for R. Blakeslee Gable

04/03/2024

\*\* 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.