FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average bur	den						
hours per response	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Re	esponses)																	
1. Name and Address of Reporting Person * FAYARD GARY P					2. Issuer Name and Ticker or Trading Symbol COCA COLA CO [KO] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2010									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Executive Vice President & CFO				
(Last) (First) (Middle) THE COCA-COLA COMPANY, ONE COCA-COLA PLAZA																		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								rear)	6. Individual or Joint/Group Filing(Check Applicable Line)					
ATLANTA, GA 30313 (City) (State) (Zip)					Table L. Nan-Darivative Scenritics Acqu									ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if r) any (Month/Day/Year)			3. T	rans	action	4. (A	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownershi Form:	Beneficial	
				(Mo	onth/Day/	Year,	(Code	· V	Ai	mount	(A) o (D)	r Price	(Instr. 3 a	nd 4)		Direct (D or Indirec (I) (Instr. 4)	
Common Stock, \$.25 Par Value 12/31/2			12/31/2010			F ⁽¹⁾			25	5,470	D	\$ 65.58	167,313	3 (2)		D		
Common Stock, \$.25 Par Value													9,033 (3	3 (3)		I	By 401(k) Plan	
			Table II	- Der	rivative S	ecuri	ties A	cqu	in tl a cı	nis f Irrei	orm an	e not lid Ol		to respo ol numbe	nd unless	nation contain the form disp		C 1474 (9-02)
				` Y	., puts, ca		arra	_	-									
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date Execution Date Or Exercise Price of Derivative Security 3. Transaction Execution Date (Month/Day/Year) (Month/Day/Year)			Code (Instr. 8) D S A (A D D (I I I I I I I I I I I I I I I I I			Number of Derivative Securities Acquired (A) or Disposed of (D) Instr. 3, 4, and 5)		and Expir (Month/E		Exercisable fration Date Day/Year)		7. Title and of Underlyi Securities (Instr. 3 and	ing	Derivative Security	Securities Beneficially Owned Following Reported	Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V (A	() (A]	Date Exercis	able	Expira Date	ation ,	Γitle	Amount or Number of Shares				
Hypothetical Shares	\$ 0 (4)								<u>(5</u>)	<u>(:</u>		Common Stock, \$.25 Par Value	11,519		11,519 (6)	I	By Supplementa Benefit Plan

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FAYARD GARY P THE COCA-COLA COMPANY ONE COCA-COLA PLAZA ATLANTA, GA 30313			Executive Vice President & CFO					

Signatures

/s/ Gloria K. Bowden, Attorney-in-Fact for Gary P. Fayard	01/04/2011
-**Signature of Reporting Person	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) Represents shares withheld to satisfy tax liabilities upon the vesting of restricted stock issued under the 2006-2008 performance share unit
- (2) Includes 3,819 shares issued pursuant to dividend reinvestment plans.
- (3) Shares credited to my account under The Coca-Cola Company Thrift & Investment Plan, a tax-qualified 401(k) plan, as of December 30, 2010.
- (4) Each hypothetical share is equal to one share of Common Stock of The Coca-Cola Company.
- (5) There is no data applicable with respect to the hypothetical shares.
- (6) As of December 30, 2010.

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.