#### FORM 4

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

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average bur	den hours
ner resnonse	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 * Bozer Ahmet C					2. Issuer Name and Ticker or Trading Symbol COCA COLA CO [KO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) THE COCA-COLA COMPANY, ONE COCA- COLA PLAZA					3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015								X Officer (give title below) Other (specify below)  Executive Vice President					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
ATLANTA,	GA 30313	(State)	(Zip)															
(City)		(State)	(Zip)				Tab	le I - I	Non-Dei	rivative	Securi	ties Acqui	red, Dispose	d of, or Ben	eficially Owned	i		
(Instr. 3)		2. Transaction Date (Month/Day/Yea	ar) any			(Instr. 8)		(.	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s (Instr. 3 and 4)		6. Ownership Form: Direct (D)	7. Nature p of Indirect Beneficial Ownership			
				(WOM	.11/ 12/6	ay/ I car)	Со	de	V	Amount	(A) o (D)	Price	OI (I			t (Instr. 4)		
Common Sto	ck, \$.25 Pa	ar Value											180,966 (1)			D		
Common Sto	ck, \$.25 Pa	ar Value											18,068 (2)			I	By 401(k) Plan	
			Table I			Securiti		c	urrentl d, Dispo	y valid sed of, o	OMB or Bene	control n	umber.	less the to	rm displays a			
1. Title of Derivative Security (Instr. 3)  2. Conversi or Exerc Price of Derivativ Security		ce of (Month/Day/Yea			4. 5. Numb Transaction Derivati Code Securities			ber of ive es es ed (A) osed of 6. Date Exercisab Expiration Date (Month/Day/Year				7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)		e rcisable	Expirati Date	ion	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Employee Stock Option (Right to Buy)	\$ 41.885	02/19/2015		A		293,08	3		(3)	02/18/	/2025	Commo Stock, \$.25 Pa Value	r 293,083	\$ 0	293,083	D		
Hypothetical Shares	<u>(4)</u>								<u>(5)</u>	C	<u>5)</u>	Commo Stock, \$.25 Pa Value	r 17,299		17,299 (6)	I	By Supplementa 401(k) Plan	

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Bozer Ahmet C THE COCA-COLA COMPANY ONE COCA-COLA PLAZA ATLANTA, GA 30313			Executive Vice President				

#### **Signatures**

/s/ Ahmet C. Bozer	02/23/2015
***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) Includes shares acquired under a dividend reinvestment plan.
- (2) Shares credited to my account under The Coca-Cola Company 401(k) Plan, as of February 18, 2015.
- (3) Option (with tax withholding right) granted on February 19, 2015 under The Coca-Cola Company 2014 Equity Plan. One-fourth of grant becomes exercisable on each of the first, second, third and fourth anniversaries of the grant date.
- (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 February 18, 2015.

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.