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

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

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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 Responses)											
1. Name and Address of Reporting Person MANN JENNIFER K	2. Issuer Name and COCA COLA CO		rading	g Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) THE COCA-COLA COMPANY, COLA PLAZA	0. TT 0.0 0 1	3. Date of Earliest Transaction (Month/Day/Year) 04/30/2018					XOfficer (give title below) Other (specify below) Senior Vice President				
(Street) ATLANTA, GA 30313	2	4. If Amendment, Da	te Original I	Filed(N	Month/Day/Y	(ear)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State)	(Zip)		Table I - N	on-De	erivative	Securiti	ies Acqu	uired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		(A) or Disposed of (D)		of (D)	Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)		
Common Stock, \$.25 Par Value	04/30/2018		F		2,968 (1)	D	\$ 43.33	24,958	D		
Common Stock, \$.25 Par Value								5,117 ⁽²⁾	Ι	By 401(k) Plan	

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.

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)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact Code	tion)	5. Num' of Deriv Secur Acqu (A) o Dispo of (D (Instr	6. Date Exercisable and Expiration Date (Month/Day/Year) volume or sposed (D) sstr. 3,		7. Title and Amount of Underlying Securities		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Derivative Security: Direct (D) or Indirect	Beneficial	
				Code		4, and (A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Hypothetical Shares	<u>(3)</u>							<u>(4)</u>	<u>(4)</u>	Common Stock, \$.25 Par Value	1,848		1,848 ⁽⁵⁾	Ι	By Supplemental 401(k) Plan

Reporting Owners

		Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
MANN JENNIFER K THE COCA-COLA COMPANY ONE COCA-COLA PLAZA ATLANTA, GA 30313			Senior Vice President						

Signatures

/s/ Jennifer K. Mann	05/02/2018
**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 a one-time award of restricted stock units issued on April 29, 2015 under The Coca-Cola Company 2014 Equity Plan.
- (2) Shares credited to my account under The Coca-Cola Company 401(k) Plan, as of April 30, 2018.
- (3) Each hypothetical share is equal to one share of common stock of The Coca-Cola Company.
- (4) There is no data applicable with respect to the hypothetical shares.
- (5) As of April 30, 2018.

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.