FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235- 0104						
Estimated average burden							
hours per response:	0.5						

## INITIAL STATEMENT OF 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

1. Name and Address of Reporting Person* <u>Coventry Elaine Moyese</u>	2. Date of Ex Requiring St (Month/Day/	atement	3. Issuer Name and Ticker or Trading Symbol Coca-Cola Consolidated, Inc. [ COKE ]							
Bowers	05/09/2023		Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Last) (First) (Middle)			X Director	10% O	wner					
4100 COCA-COLA PLAZA			Officer (give title below)	Other ( below)	specify					
(Street) CHARLOTTE NC 28211					(CI	heck Applicable X Form filed Person	by One Reporting			
(City) (State) (Zip)						Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	or Indirect (I) (Instr. 5)	3)			

Explanation of Responses:

## Remarks:

No securities are beneficially owned.

/s/ Elaine Moyese Bowers

05/15/2023

Coventry

\*\* Signature of Reporting

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.