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's  Tollison Nathaniel Brent	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Coca-Cola Consolidated, Inc. [ COKE ]						
(Last) (First) (Middle) 4100 COCA-COLA PLAZA	05/09/2023	4. Relationship of Reporting Issuer (Check all applicable)  Director  X Officer (give	10% O Other (	wner File	f Amendment, d (Month/Day	Date of Original /Year)		
(Street) CHARLOTTE NC 28211 (City) (State) (Zip)		See Rema	below) arks		eck Applicable Form filed Person	by One Reporting by More than One		
Table I - Non-Derivative Securities Beneficially Owned								
		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owne Form: D (D) or In (I) (Instr.	irect Own direct	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 a Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
	Date Expira Exercisable Date	ion Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

## Remarks:

Senior Vice President, Public Affairs, Communications and Sustainability and Assistant to the President

No securities are beneficially owned.

/s/ Nathaniel Brent

**Tollison** 

05/15/2023

\*\* Signature of Reporting

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 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.