FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

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 Re MANN JENNIFE	R K	2. Date of Event Requiring Staten (Month/Day/Year 05/09/2017	nent (3. Issuer Name and Ticker or Trading Symbol COCA COLA BOTTLING CO CONSOLIDATED /DE/ [COKE]							
(Last) (First) (Middle) 4100 COCA-COLA PLAZA				Relationship of Reporting Perso (Check all applicable) X Director Officer (give title	on(s) to Issue 10% Owne Other (spe	er (Mo	If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check				
(Street) CHARLOTTE NC (City) (State)	28211 (Zip)	-		below)	below)	Apr	Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				Amount of Securities eneficially Owned (Instr. 4)			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 Exercise Expiration Date (Month/Day/Yea			ate	3. Title and Amount of Securi Underlying Derivative Securi		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)					

Explanation of Responses:

Remarks:

No securities are beneficially owned.

<u>/s/ Jennifer K. Mann</u> <u>05/15/2017</u>

** Signature of Reporting Person Date

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

- * 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.