FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
I							
Estimated average burden							
hours per response	: 0.5						

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

			С	or Section 30(h) of the	ne Inves	tment	Company Act	of 1940	1				
1. Name and Address of Reporting Person* Patricio Miguel				2. Issuer Name and Ticker or Trading Symbol Kraft Heinz Co [KHC]						Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last)	(First)	(Midd		3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024					^			(specify	
THE KRAFT HEINZ COMPANY ONE PPG PLACE, SUITE 3200 (Street) PITTSBURGH PA 15222				4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Indiv Line)	,				
(City)	(State)	(Zip)	F	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See					ursuant to a contr	t to a contract, instruction or written plan that is intended to elastruction 10.			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 6. Date Exercisable and 7. Title and 9. Number of 11. Nature 3A. Deemed 5. Number 8. Price of 10. Ownership Form: of Indirect Beneficial Conversion Execution Date, Transaction Expiration Date (Month/Day/Year) Amount of Securities Derivative Security derivative Securities Date (Month/Day/Year) Derivative Security if any (Month/Day/Year) Code (Instr. or Exercise Price of Derivative Direct (D) (Instr. 3) Securities Underlying Derivative (Instr. 5) Beneficially Ownership or Indirect (I) (Instr. 4) Acquired Owned (Instr. 4) Security (Instr. 3 and 4) Security (A) or Disposed Following Reported Transaction(s) of (D) (Instr. 3. 4 (Instr. 4) and 5) Amount Number Expiration Date Exercisable Code (A) (D)

131,500⁽¹⁾

D

\$38.0154⁽²⁾

992,049

563,570(3)

Ι

D

By trust

Explanation of Responses:

Common Stock

Common Stock

1. Effected pursuant to a pre-arranged trading plan established in accordance with Rule 10b5-1 of the Securities Act of 1934, as amended.

01/02/2024

- 2. This transaction was executed in multiple trades at prices ranging from \$38.00 to \$38.06. The price reported above reflects the weighted average sale price. Mr. Patricio hereby undertakes to provide upon request to the SEC staff, the Issuer, or a stockholder of the Issuer full information regarding the number of shares and the prices at which the transaction was effected
- 3. Includes an additional 6,332 shares acquired through a dividend reinvestment program.

Remarks:

/s/ Heidi Miller by Power of 01/04/2024 <u>Attorney</u>

** Signature of Reporting Person 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 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).

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.