FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden 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

Name and Address of Reporting Person*     OLIVEIRA RAFAEL							2. Issuer Name and Ticker or Trading Symbol Kraft Heinz Co [ KHC ]									ck all app Direc	licable)	ing Person(s) to Is  10% O Other (		wner
(Last) (First) (Middle) C/O THE KRAFT HEINZ COMPANY ONE PPG PLACE, SUITE 3200							3. Date of Earliest Transaction (Month/Day/Year) 06/01/2020									below	below)		below) at International	
(Street) PITTSBURGH PA 15222 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					2. Transac Date (Month/Da	Executy/Year) if any		Deemed ecution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 3, 5)			5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or	Price	Transa	ction(s) 3 and 4)			,,	
Common Stock 06/01.						2020				A		32,874(1	) A \$(		\$0	0 359,882 <sup>(2)</sup>			D	
Common Stock 06/01/2						2020				A		30,341(3	B) A \$0		\$0	390,223			D	
	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)	2. Conversit or Exercis Price of Derivative Security	on se	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. Subject to the terms and conditions of the applicable award agreement, these restricted stock units are scheduled to settle in stock as follows: 50% on the second anniversary of the grant date, 25% on the third anniversary of the grant date and the remaining 25% on the fourth anniversary of the grant date.
- 2. Includes an additional 4,291 shares accrued under a dividend reinvestment program.
- 3. Subject to the terms and conditions of the applicable award agreement, these restricted stock units are scheduled to settle in stock as follows: 50% on the second anniversary of the grant date and the remaining 50% on the third anniversary of the grant date.

## Remarks:

/s/ Heidi Miller, by Power of <u>Attorney</u>

06/03/2020

\*\* 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.