1. Name and Address of Reporting Person
Torres Flavio
C/O THE KRAFT HEINZ COMPANY
ONE PPG PLACE, SUITE 3200
PITTSBURGH PA 15222

2. Issuer Name and Ticker or Trading Symbol
Kraft Heinz Co [ KHC ]

3. Date of Earliest Transaction (Month/Day/Year)
08/16/2022

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
X Director
10% Owner
Officer (give title below)
EVP & Global Chf Sply Chn Ofcr

6. Individual or Joint/Group Filing (Check Applicable Line)
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

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 4)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>08/16/2022</td>
<td>A</td>
<td></td>
<td>49,310 (1)</td>
<td>A</td>
<td>279,363</td>
<td>D</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Represents the number of shares earned under performance share units granted on June 1, 2020 for which the second of two performance periods has been completed and achievement certified, and which units vested and settled with respect to 50% of the earned shares on June 1, 2022, and the remaining 50% of the earned shares vest in two equal installments on June 1, 2023 and June 1, 2024, in each case subject to the terms and conditions of the applicable award agreement.

Remarks:
/s/ Nicole Fritz, by Power of Attorney
08/18/2022
** 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).
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.

/s/ Nicole Fritz, by Power of Attorney
08/18/2022
** Signature of Reporting Person Date