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PEPSICO I Form 4	NC													
March 08, 2											OMB AF	PROVAL		
FORM	4 UNITED	STATES							GE CO	OMMISSION	OMB	3235-0287		
Check this box			Washington, D.C. 20549								Number:	January 31,		
if no lor subject Section Form 4 Form 5	to STATEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNER SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange A									Expires: Estimated a burden hour response	2005 verage		
obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the l	Public U	Jtility	Ho		mpa	ny A	ct of 1	1935 or Section				
(Print or Type	Responses)													
1. Name and Address of Reporting Person <u>*</u> TRUDELL CYNTHIA						d Ticker o	or Trae	ding		5. Relationship of Reporting Person(s) to Issuer				
				EPSICO INC [PEP] Date of Earliest Transaction						(Check all applicable)				
(Mo				(Month/Day/Year) 03/06/2017						Director 10% Owner Officer (give title 0ther (specify below) below) below) EVP, HR & Chief HR Officer				
(Street)				4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
PURCHAS	SE, NY 10577		Filed(Mo	onth/Day	/Yea	ar)			-	Applicable Line) _X_ Form filed by Or Form filed by Mo Person				
(City)	(State)	(Zip)	Tal	ole I - N	on-	Derivativ	e Seci	urities		ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A) Transactions Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cada	v	Amount	or (D)	1	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
PepsiCo, Inc. Common	03/06/2017			S	·		D	\$).5724	38,739	D			
Stock PepsiCo, Inc. Common Stock										91	I	by Trust		
PepsiCo, Inc. Common Stock										88.3888 <u>(1)</u>	I	By 401(k)		

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title	of 2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivat	tive Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Securit	y or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3	3) Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	5		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or Number		
						Exercisable	isable Date		of		
				Code V	(A) (D)				Shares		
				Code v	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TRUDELL CYNTHIA 700 ANDERSON HILL ROAD PURCHASE, NY 10577			EVP, HR & Chief HR Officer					
Signatures								
/s/ Cynthia A. Nastanski, Aty-in-Fact		03/08/2017						
**Signature of Reporting Person		Date						

Explanation of Responses:

* 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).

(1) Reflects the number of shares held under the reporting person's account in the PepsiCo Savings Plan as of March 6, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.