FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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 OMB Number: 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

| 1. Name and Address of Reporting Person* MCKENNA MATTHEW M | | | | | | 2. Issuer Name and Ticker or Trading Symbol PEPSICO INC [PEP] | | | | | | | | | | | k all appl Direct | tor | | 10% Owner | |
|--|---|--|--|-------|---------|--|---|---|-----|----------------------------------|-------------------------|--|------------------------------|--|-----------------------------------|----------------------|--|---|---------------|--|---|
| (Last) 700 ANI | st) (First) (Middle) O ANDERSON HILL ROAD | | | | | 3. Date of Earliest Transacti 02/01/2005 | | | | | action (Month/Day/Year) | | | | | X | | Officer (give title below) SVP of Fire | | Other (specify below) | |
| (Street) PURCHASE NY 10577 | | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Ind Line) X | , | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | . 5.55.1 | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | ar) if | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transac Code (II 8) | tion | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | or | 5. Amou Securiti Benefic | int of es ially Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | Code | V | Amount | | (A) or (D) | Pri | ice | Transaction(s) (Instr. 3 and 4) | | | | (11150.4) |
| PepsiCo, Inc. Common Stock 02/01/ | | | | | | 2005 | | | | A | | 18,140 | 0(1) | A | | \$ <mark>0</mark> | 31 | 31,262 | | D | |
| PepsiCo, Inc. Common Stock | | | | | | | | | | | | | | | | | 1,3 | 375 ⁽²⁾ | | | By 401(k) |
| | | Т | able II - | | | | | | | | | sed of onverti | | | | | Owned | | • | , | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | | ransaction ode (Instr. | | vative crities cired r osed) r. 3, 4 | Ex | Date Exe piration onth/Day | Date | | Amo Secu Unde Deriv | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | S (I | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | | | Dat | te ercisable | | opiration | C | | Amou or Numb of Share | er | | | | | |
| Employee Stock Option (right to | \$53.75 | 02/01/2005 | | | A | | 385 | | 02 | /01/2008 | 01 | /31/2015 | Peps In Com | c. mon | 385 | 5 | \$0 ⁽³⁾ | 385 | | D | |

Explanation of Responses:

- 1. This number reflects the number of restricted stock units granted to the reporting person as a portion of his compensation for serving as an officer of PepsiCo, Inc. Restricted stock units are calculated on a one unit for one share basis
- 2. Reflects number of shares held under the reporting person's account in the PepsiCo 401(k) Plan as of 12/31/2004.
- 3. There is no price for this derivative security.

Remarks:

02/03/2005 Matthew M. McKenna

** 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.