SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

3235-0104

Estimated average burden

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 [*] Diamond Susan M	Requiring Stat	2. Date of Event Requiring Statement (Month/Day/Year) 05/03/2023					
(Last) (First) (Middle) PEPSICO, INC., 700 ANDERSON HILL ROAD (Street) PURCHASE NY 10577 (City) (State) (Zip)	- -		4. Relationship of Reporting Issuer (Check all applicable) X Director Officer (give title below)	10% C	wner (specify	A Person	Year) int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			. Amount of Securities Seneficially Owned (Instr. I)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
PepsiCo, Inc. Common Stock			0	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	itle of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)	curity Convers		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
Explanation of Personses:		expiration bate		Amount or Number of Shares	Price of Derivative Security	Direct (D) e or Indirect (I) (Instr. 5)	5)
Explanation of Responses:							

Remarks:

Exhibit List Exhibit 24 - Power of Attorney

/s/ Cynthia A. Nastanski,

Person

Attorney-in-Fact

** Signature of Reporting

05/05/2023

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 5 (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.

OMB Number: hours per response: 0.5