Hovde Genevieve

					S AND EXCHANGE COMMISSION ton, D.C. 20549				OMB APPROVAL				
			vv asnin	igion, L	J.C. 20549			-	MB lumber:	3235	-0104		
	INITIAL STATEMENT OF BEI SECURI								xpires:	Janua	ry 31, 2005		
									Estimated average burden hours per				
		on 17(a) of	the Public Utility 0(h) of the Inves	y Holdii	ng Company	Act of 193			esponse		0.5		
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> Hovde Genevieve			2. Date of Event R Statement (Month/Day/Year)	Keurig Dr Pepper Inc. [KDP]			Symbo	ol					
(Last)	(First)	(Middle)	07/09/2018				-		Amendment, Date Original Month/Day/Year)				
53 SOUTH	AVE.				(Chaoli	all annliaghla			,				
	(Street) (Check all applicable) 6.		Indivi	ndividual or Joint/Group									
BURLINGTON, MA 01803					OfficerOther		ing(Check Applicable Line) _ Form filed by One Reporting son _ Form filed by More than One porting Person						
(City)	(State)	(Zip)	Tal	ble I - N	Non-Derivat	ive Securit	ies Benef	es Beneficially Owned					
1.Title of Security (Instr. 4)			2. Amount of Beneficially ((Instr. 4)			3.4. Nature of OwnershipOwnershipOwnershipForm:(Instr. 5)Direct (D) or Indirect (I) (Instr. 5)			lirect Benefi	icial			
Reminder: Re owned directly	• •		ach class of securitie	s benefici	^{ially} S	EC 1473 (7-02	2)						
	inforn requi	nation cont red to respo	pond to the colled ained in this form and unless the for MB control numb	are not m displa									
	Table II - De	rivative Secu	rities Beneficially C)wned (e.	g., puts, calls,	warrants, op	tions, conv	ertible	e securities)			
1. Title of De (Instr. 4)	rivative Securi	Expi	ate Exercisable and ration Date v/Day/Year)	Securiti	and Amount of es Underlying ive Security	f 4. Conversi or Exerci Price of		of	6. Nature Beneficia (Instr. 5)				

Date

Exercisable Date

Expiration

Title

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Derivative

Security

Amount or

Number of

Shares

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Hovde Genevieve 53 SOUTH AVE. BURLINGTON, MA 01803	ÂX	Â	Â	Â		
Signatures						
Kristin E. Blazewicz, attorney in fact	07/10/2018					
**Signature of Reporting Person		Date				

Explanation of Responses:

No securities are beneficially owned

* 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. 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.