FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP
	•				•

	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burd	en							
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* <u>ALTRIA GROUP INC</u>						2. Issuer Name and Ticker or Trading Symbol KRAFT FOODS INC [KFT]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) 120 PAR	Last) (First) (Middle) 20 PARK AVENUE							3. Date of Earliest Transaction (Month/Day/Year) 01/08/2004									Officer (give title Other (specify below) below)				
(Street) NEW YO			10017 (Zip)		4. If	f Ame	ndmen	t, Date	of C	Original F	Filed	(Month/D	ay/Year)		Line) K Form	filed by One	e Rep	g (Check Ap orting Perso n One Repo	n	
		Tab	le I - Noi	າ-Deriv	ative	Sec	curiti	es A	cqu	ired, [Disp	osed (of, or B	ene	ficiall	y Owne	d				
Date			2. Transa Date (Month/I		Execution Date,			´	3. 4. Securitie Transaction Disposed Code (Instr. 5)							es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount (A) or (D)		Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 01/08/					3/2004	2004			X		960 ⁽	(1) D \$31		\$31	276,597,630		D				
		Т	able II -	Derivat (e.g., p												Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (I 8)				6. Date Exercisal Expiration Date (Month/Day/Year)			Amount of		of es ng re Sec	curity	3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		epiration ate	Title	or Nu of	mber						
Employee stock option (right to buv)	\$31	01/08/2004			х			960	01/	/31/2003	06	/12/2011	Class A Common	٥	960	\$0	0		D		

Explanation of Responses:

 $1. \ Shares \ acquired \ by \ employee \ from \ Altria \ Group, \ Inc. \ pursuant \ to \ employee \ option \ exercise.$

G. Penn Holsenbeck, Vice

President, Associate General 01/09/2004

Counsel & Corporate Secretary

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).