FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Exch ompany A									
1. Name and Address of Reporting Person* FARRELL W JAMES					2. Issuer Name and Ticker or Trading Symbol KRAFT FOODS INC [KFT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
				3. Stateme	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)						'	Offic	e	10% Owner Other (specify				
(Last) (First) (Middle)				12/31/20	12/31/2005							belov			below)		500	
				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street))	K Forn	n filed by C	ne Re	porting P	erson	1
(City) (State) (Zip)					Form filed by More than One Reporting Person										ting			
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefi	ciall	y Own	ed				
Dai			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquire Of (D) (Instr. 3, 4 and			or Dispos	ed	5. Amou Securiti Benefic	es	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership	
								Amour	nt	(A) or (D) Price			Issuer's			ect (I)	(Instr	
CLASS A COMMON STOCK			04/26/2005	04/26/2005		A		74(1)		A	\$31.	15 8		,883		D		
CLASS A COMMON STOCK													760			I	TRU FOR	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secul Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed)	Expii (Mon	ate Exercisable and ration Date tht/Day/Year) Expiration cisable Date		Amo Secu Undo Deriv Secu and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Numbin of Shares		Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		1. Nature of Indirect Beneficial Ownership Instr. 4)

Explanation of Responses:

1. Reinvestment of dividends under the 2001 Compensation Plan for Non-Employee Directors.

/S/ MARC S. FIRESTONE,
BY POWER OF ATTORNEY

02/10/2006

** 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.