FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average b	urden								

0.5

hours per response:

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

1. Name and Address of Reporting Person* ALTRIA GROUP, INC.				2. Issuer Name and Ticker or Trading Symbol KRAFT FOODS INC [KFT]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
ALIKI	A GROU	<u>F, IIVC.</u>										_				Directo	r	X	10% O\	wner
(Last) (First) (Middle) 120 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 01/08/2007								Officer (give title Other (speci below) below)					specify	
					4 19	f Amo	ndmo	at Data	of O	riginal F	ilod	(Month/D	ov/Voor)		6 Inc	lividual or	loint/Crour	Filipe	g (Check Ag	nlicable
(Ctt)					_ 4. 11	Ame	nume	ii, Dale	UI UI	nyma F	·lieu	(ואוטוונוו)	ay/ rear)		Line)	iiviuuai oi .	Johnveroup) HIII I	g (Check Ap	phicable
(Street) NEW YO	ORK N	V	10017												X	Form 1	iled by One	e Rep	orting Perso	n
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					-											Perso	1			
(City)	(S	tate)	(Zip)																	
		Tab	le I - No	n-Deri\	vative	Sec	curit	ies Ad	ani	ired. Γ	Dist	osed c	of, or Bo	enefi	icially	, Owner	1			
				1		_			÷				-							
1. Title of Security (Instr. 3) 2. Trans Date (Month)				ar) E	2A. Deemed Execution Date, f any		, i	3. 4. Securities Acquired Disposed Of (D) (Instr. Code (Instr. 5)			red (A) str. 3,) or 4 and	5. Amou Securitie Benefici	es ally	Form (D) o	Ownership Form: Direct D) or Indirect	7. Nature of Indirect Beneficial			
						- 1	(Month/Day/Year)		ar) L) 8)						Owned Following Reported		(I) (IN		Ownership (Instr. 4)
										Code	V	Amount	ıt (A) or Pr		rice	Transaction(s) (Instr. 3 and 4)				
Common Stock 01/08/					8/2007	/2007		\top	Х		1,780 ⁽¹⁾ D		\$31	276,477,070		D				
		7	able II -	Deriva	tive 9	Seci	ıritio	e Acc	uire	ad Di	enc	sed of	or Ber	afic	ially	Owned				
		•										onverti				Ownea				
							-											. 1		11. Nature
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/Day	Date,	4. Transa Code (8)				Exp	6. Date Exercisa Expiration Date (Month/Day/Year		Amount of		of s ng e Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership t (Instr. 4)
														Amo	ount					
					Code	v	(A)	(D)	Date	e ercisable		xpiration ate	Title	Nun of Sha						
Employee							 ` /	'			╁			+	-					+
Stock option (right to buy)	\$31	01/08/2007			X			1,780	01/3	/31/2003	06	5/12/2011	Common Stock	1,7	780	\$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 Counsel and Corporate

01/09/2007

Secretary

** Signature of Reporting Person

 $\label{lem:Remodel} \textit{Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.}$

- * 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.