FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APPRO	OVAL
OMB Number:	3235-0287
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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	F, IIVC.										_				Directo	or	X	10% O	vner
(Last) (First) (Middle) 120 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 01/31/2007									Officer (give title Other (specify below) below)					
					4 1	fΛma	ndmai	nt Date	of O	riginal E	hali	(Month/D	av/Voar)		6 Inc	lividual or	loint/Grour	- Eilin	g (Check Ar	nlicable
(Ctroot)					_ 4. "	AIIIC	iluillei	ii, Daie	01 0	nigiriai i	iicu	(IVIOITITI)	ay/ rear)		Line)	iividuai oi .	Jointa Group	יוווו ו כ	y (Check A	plicable
(Street) NEW YO	ORK N	v	10017												X	Form t	iled by One	e Rep	orting Perso	n
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					-											Persoi	า			
(City)	(S	tate)	(Zip)																	
		Tab	le I - No	n-Deriv	vative	Sec	curit	ies Ad	can	ired. C	Dist	osed o	of. or B	enef	icially	/ Owned	<u> </u>			
4 Tiple - 64	2			1		_				-			-					6.00	anabin	7. Nature
1. Title of Security (Instr. 3) 2. Trai Date (Monti					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		·,	3. 4. Securit Transaction Disposed Code (Instr. 5)			ties Acqu d Of (D) (Ir	rea (A Istr. 3,	4 and	5. Amou Securitie Benefici	es	Form (D) o	n: Direct r Indirect	of Indirect Beneficial Ownership	
						(MOIIII/Day/Te			",	"						Reported	ı t	", "	, (1115411 4)	(Instr. 4)
									-	Code	v	Amount	unt (A) or Pr		Price	Transaction(s) (Instr. 3 and 4)				
Common Stock 01/31/					1/2007	2007			Х		1,370 ⁽¹⁾ D		\$31	276,460,130		D				
		7	able II -	Deriva	tive 9	Saci	ıritio	e Acc	uir	ed Di	enc	sed of	or Bai	nefic	vially	Owned		,		
		•										onverti				Ownea				
		la = .:					i		_								l			T
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 (8)				Exp	6. Date Exercisa Expiration Date (Month/Day/Year		Amount of Securities Underlyin		of s ng e Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
														Am or	ount					
					Code	,	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	Nur	mber ares					
Employee							 				╁			+						
Stock option (right to buy)	\$31	01/31/2007			X			1,370	01/	/31/2003	06	5/12/2011	Commor Stock	1,3	370	\$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

02/01/2007

<u>Secretary</u>

** Signature of Reporting Person Da

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

- * 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.