FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------|----------|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | |

Estimated average burden 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(h) |

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* MAY KAREN J | | | | | | 2. Issuer Name and Ticker or Trading Symbol KRAFT FOODS INC [KFT] | | | | | | | | | | all app | licable) | | ssuer Owner (specify | |
|--|---|--|--|-------------------|---|--|--|--|--|---|--|------|--|------------------|--|--|---|---|--|--|
| (Last) (First) (Middle) KRAFT FOODS INC. THREE LAKES DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/03/2005 | | | | | | | | | | belov | v) | below ICE PRESID |) | |
| (Street) NORTHFIELD IL 60093 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ay/Year) Execu | | P.A. Deemed Execution Date, f any Month/Day/Year) | | | | ities Acquired (A) d Of (D) (Instr. 3, | | | 4 and Sec Ber | | ount of ties cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | v | Amount | | A) or D) | Price | . | Transaction(s) (Instr. 3 and 4) | | | (11301.4) | |
| CLASS A COMMON STOCK 10/03/ | | | | | | 5 | 10/03 | 10/03/2005 | | | 100,79 | 90 A | | \$ | \$0 100,7 | | 00,790 | D | | |
| 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) | rivative Conversion Date Execution I curity or Exercise (Month/Day/Year) if any | | | Date, ny/Year) | 4. Transaction Code (Instr. 8) | | n of Deriv Secu Acqu (A) o Disp of (D | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Date Exercisable and xpiration Date Month/Day/Year) ate Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

/s/ Marc S. Firestone, by power 10/05/2005 <u>of attorney</u>

** Signature of Reporting Person

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.