FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* ROSENFELD IRENE B | | | | | | 2. Issuer Name and Ticker or Trading Symbol KRAFT FOODS INC [KFT] | | | | | | | | | | | all app | licable) | • | erson(s) to Is | |
|--|---|--|--|-------|---|--|------------------|---|---------------|--|----------|--|--|------------------|-----------------------|--|---------------|--|----------------|--|--|
| (Last) (First) (Middle) C/O KRAFT FOODS THREE LAKES DR | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/29/2003 | | | | | | | | | | | | belov | v) ` | | X Other below) | |
| (Street) NORTHFIELD IL 60093 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | . Indivi ine) X | ′ | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ar) | Execution if any | A. Deemed recution Date, any lonth/Day/Year) | | Transaction | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 4 and Secur Benef Owne Report | | ities For | | Ownership rm: Direct or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | ode V | _ | Amount | (A) or (D) | | Price | | | action(s) 3 and 4) | | | | | | |
| Class A Common Stock 07/29/ | | | | | | 3 | | | | D | | 28,07 | 0 D | | \$ | \$0 | | 3,000 | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | | ransaction ode (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | 8. Pri Deriv Secu (Instr | ative rity | 9. Number of derivative Securities Securities Beneficially Owned Following Reported Transactior (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Ex Da | xpiration ate | Title | Nun of Sha | nber res | | | | | | |

Explanation of Responses:

/s/ Calvin J. Collier, by power of attorney

07/31/2003

** 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.