FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549
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STATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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* <u>Kellermann Kimberly Anne</u>					2. Is GI	2. Issuer Name and Ticker or Trading Symbol GREIF, INC [GEF,GEF.B]									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(Last) 425 WIN	(F ITER ROA	ŕ	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/16/2024										^ below	Officer (give title below) SVP, Global Operations Group			·	
(Street) DELAW	ARE O	H ·	43015		- 4. If	4. If Amendment, Date of Original Filed (Mo						(Month/D	ay/Ye	ar)	Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)		Ru	Chec	k this b	oox to ind	dicate	e that a t	transa		made p	pursuan		tract, instruct	on or writter	n plan th	nat is intende	ed to	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. To Date		2. Trans	ransaction e onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		, :	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			d (A) or	5. Amou Securiti Benefic Owned	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Ī	Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	ion(s)			(Instr. 4)		
Class A Common Stock 01/1				01/16	5/2024			М		1,302		A	\$0	5,	5,959		D				
Class A Common Stock 01/1			01/16	6/2024	5/2024			F		363		D	\$0	5,	,596		D				
Class A Common Stock 01/16				6/2024	/2024			Α		3,205	(1)	A	\$0	8,	8,801		D				
Class A (Common St	ock		01/16	6/2024	4				F		1,01	6	D	\$0	7,	785		D		
		T								,		osed of onverti	,			/ Owned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Month/Day/Year) 3. Transaction Date (Month/Day/Year) if any (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		n of E		Exp	Date Exc piration onth/Da	Date		7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (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)					xpiration ate	n oi		Amount or Number of Shares						
Restricted Stock Unit	\$0 ⁽²⁾	01/16/2024			M			1,302		(2)		(2)	Clas Com	mon	1,302	\$0	7,440	6	D		

Explanation of Responses:

- 1. Performance Shares awarded pursuant to the Company's Long Term Incentive Plan. No consideration was paid by the reporting person. Shares are subject to a one year restriction on transfer.
- 2. Each restricted stock unit represents a contingent right to receive one share of Class A common stock on the third anniversary of the grant date.

Remarks:

Kimberly A. Kellermann by L. Dennis Hoffman, Jr. pursuant to a POA filed with the

01/18/2024

Commission

** 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.