FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.	.C. 20549
----------------	-----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	OMB APPROVAL								
	OMB Number:	3235-0287								
	Estimated average	burden								
-	houre per reenonee	. 0.5								

	tion 1(b).	nuc. See		Filed	pursua or Se	ant to S ection 3	Section 30(h) d	n 16(a) of the In	of the Sovestmen	ecuriti nt Cor	es Exchang npany Act o	e Act of f 1940	of 1934	4		nours	s per res	sponse:	0.5
Name and Address of Reporting Person*     MARTZ GARY R					2. Issuer Name <b>and</b> Ticker or Trading Symbol GREIF, INC [ GEF,GEF.B ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Executive VP & General Counsel						
(Last) (First) (Middle) 425 WINTER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 01/19/2021														
(Street) DELAW	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	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/Da				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instr. 5)					d Securit	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
					Code	v	Amount	(A) (D)		Price	Transa	Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Class A (	Class A Common Stock 01/19/				2021				A		6,135	A	4	<b>\$0</b> <sup>(1)</sup>	87	7,863		D	
Class B C	Common St	ock												1,100 D					
Class A (	Common St	ock																	By 401(k) Plan
	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. Deen Executio if any (Month/E	n Date,	Code (Ir		ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	l	I	l			I	1	1 1		- 1		I	AIIIO	uni					1

## **Explanation of Responses:**

(D)

Date Exercisable

Expiration

Date

## Remarks:

/s/ Gary R. Martz

Title

Number

Shares

01/21/2021

\*\* 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.

<sup>1.</sup> 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.