FORM 4

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

9	
	J

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per respon	se: 0.5									

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

Name and Address of Reporting Person*     Rosgaard Ole G					2. Is GI	2. Issuer Name and Ticker or Trading Symbol GREIF, INC [ GEF,GEF.B ]									Relationship of the contract o	cable)	g Pers	son(s) to Iss			
(Last) 425 WIN	(Fi	rst) (	(Middle)			Date of 16/20		est Tran	saction (I	Лоnth	/Day/Year)		X Officer (give title below)  President and CEO								
(Street) DELAW	ARE O	H 4	43015		_   4. If _	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Appl Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(Si	tate) (	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intensatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												hat is intende	ed to		
		Tabl	le I - No	n-Deri	vative	Sec	uriti	ies Ac	quired	, Dis	sposed o	of, c	r Ber	eficia	ly Owned	<u> </u>					
Date			2. Trans Date (Month/		ay/Year) Execution Date		Execution Date,		3. Transaction Code (Instr.		ties A	Acquired D) (Instr	(A) or . 3, 4 and	Beneficia Owned F	s For (D) ollowing (I) (		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)		Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Class A C	Common Sto	ock		01/16/2024					М		8,288		A	\$0	68,457	7.3981(1)		D			
Class A Common Stock				01/16/2024					F		3,552	2	D	\$0	64,90	05.3981		D			
Class A Common Stock 01/					6/2024				A		27,216(2)		A	\$0	92,12	21.3981		D			
Class A C	Common Sto	ock		01/10	5/2024				F		9,399	9	D	\$0	82,72	82,722.3981 D					
Class A (	Common Sto	ock													3,64	16.98	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) (Month.				ned 4.		ction	5. Number of			xercis	sable and	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares							
Restricted Stock Unit	\$0 <sup>(3)</sup>	01/16/2024			M			8,288	(3)		(3)	Cor	ass A nmon tock	8,288	\$0	57,174	4	D			

## Explanation of Responses:

- 1. Includes 357.3981 shares of Class A Common Stock acquired in December 29, 2023 under the Greif, Inc. Colleague Stock Purchase Plan.
- 2. 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.
- 3. 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:

Ole G. Rosgaard by L. Dennis Hoffman, Jr. pursuant to a POA 01/18/2024

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).