| SEC Form 4 | |
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obligations may Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| - 1 | | |
|-----|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
| | Estimated average burde | en |
| | hours per response: | 0.5 |
| | | |

| 1. Name and Address of Reporting Person* AVRIL VICKI L | | | | 2. Issuer Name and Ticker or Trading Symbol <u>GREIF INC</u> [GEF,GEF.B] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | |
|---|-------------------------------|----------|--|--|---|---------|---------------|-----|------------------------|--|---|---|--|
| (Last) 425 WINTER R | (First) . <mark>OAD</mark> | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 08/25/2008 | | | | | | Officer (give title below) | Other below | (specify) | |
| (Street) | | | 4. If Ar | nendment, Date of C | Driginal | Filed (| Month/Day/Yea | ır) | 6. Indiv Line) X | vidual or Joint/Group Form filed by One | | | |
| DELAWARE | OH | 43015 | | | | | | | | Form filed by Mor Person | 1 0 | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | |
| Date | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) Code V | | (4) or | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (cig, puis, cais, warans, 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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Nun Deriva Securi Acquin or Dis of (D) 3, 4 an | tive ties red (A) posed (Instr. | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Phantom Stock Units (Cash Only Rights) | \$63.2 | 08/25/2008 | | A | | | 11.87 | 08/08/1988 ⁽¹⁾ | 08/08/1988 ⁽¹⁾ | Class A Common Stock | 11.87 | \$63.2 | 3,736.53 | D | |
| Phantom Stock Units (Cash Only Rights) | \$63.2 | 08/26/2008 | | A | | 11.87 | | 08/08/1988 ⁽¹⁾ | 08/08/1988 ⁽¹⁾ | Class A Common Stock | 11.87 | \$63.2 | 3,748.4 | D | |

Explanation of Responses:

1. The units are to be settled in cash upon the reporting person's retirement from the Board.

Vicki L. Avril by John K. Dieker pursuant to a POA filed 08/27/2008 with the 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.