FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHAN	IGES IN BENEFICIAL	OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
	hours per response:	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

1. Name and Address of Reporting Person* DEMPSEY MICHAEL H						2. Issuer Name and Ticker or Trading Symbol GREIF INC [GEF,GEF,B]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															X Director			X 10%	Owner		
(Last) (First) (Middle) 425 WINTER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/27/2006									Offic below	er (give title w)	9	Other below	(specify /)			
,					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) DELAWARE OH 43015														X Form filed by One Reporting Person							
															Forn Pers	n filed by M on	ore tha	an One Re	porting		
(City)	(St		Zip)																		
			e I - No			_				l, Dis	sposed o	-						-			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)			and Securitie Beneficia Owned F		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
							v	Amount	(A) o (D)	r Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)					
Class B Common Stock			12/27/2			G		220	D	\$0.	00(1)	507,065		D							
Class A Common Stock													1,727(2)		D						
Class B C	Class B Common Stock													106,255		I		See footnote. ⁽³⁾			
Class B C	ommon Sto	ock													5,37	5,375,904 I			See footnote. ⁽⁴⁾		
Class A C	ommon Sto	ock													1 7349 1 1 1			See footnote. ⁽⁴⁾			
Class B C	ommon Sto	ock													1,012 I			See footnote. ⁽⁵⁾			
		Та	ıble II -								osed of, convertib				Owned						
1. Title of 2. 3. Transaction Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			4. Transa	5. Numb ansaction of ode (Instr. Derivati		mber rative rities ired r osed)		Exerc ion Da	sable and te Amount of Securities Underlying Derivative Security (Ins and 4)		and it of ies ying ive y (Instr.	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Number of Shares								

- 1. Gift to the Henry C. Dempsey Irrevocable Trust, Shannon Dempsey Trustee.
- 2. 853 shares are subject to restriction on transfer.
- 3. Michael H. Dempsey is the Trustee of the Naomi C. Dempsey Charitable Lead Annuity Trust.
- 4. Michael H. Dempsey is the Trustee of the Naomi C. Dempsey Trust.
- 5. These shares are held in a trust for the reporting person's son. The reporting person's spouse is the trustee of the trust. The reporting person disclaims beneficial ownership of these securities and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for the purpose of Section 16 or for any other purpose

Michael H. Dempsey by John 12/28/2006 K. Dieker pursuant to a POA filed 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.