FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES II	N BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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>DEMPSEY MICHAEL H</u>				2. Issuer Name and Ticker or Trading Symbol GREIF INC [GEF,GEF.B]								(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) 425 WINTER	(Firs	,	Middle)	3. Date of Earliest Tran 01/11/2005				st Trans	saction (Month/Day/Year)						Offic below	er (give title w)	•	Other below	(specify)
(Street) DELAWARE OH 43015			4. If	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						
(City)	(Sta		Zip)		<u> </u>														
Table I - No 1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		Transaction Disposed C Code (Instr. 5)			es Acquired (A) or Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	r _{Pri}	ce	Transac (Instr. 3	tion(s)			(Instr. 4)	
Class B Com	mon Sto	ck		01/11/	2005				G		850	D	\$(0.00(1)	109	9,335]		See footnote ⁽²⁾
Class A Common Stock													874		D				
Class B Common Stock														507,657		Ι			
Class A Common Stock													2,349]		See footnote. ⁽³⁾		
Class B Common Stock													5,375,904		I		See footnote. ⁽³⁾		
Class B Com	mon Sto	ck													4	120]		See footnote. ⁽⁴⁾
Class B Common Stock													389,466		I		See footnote. ⁽⁵⁾		
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/Day/Year) (Month/Day/Year)						6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		r. 3	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Or For Di). wnership orm: irect (D) r Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. Distribution by the Naomi C. Dempsey Charitable Lead Annuity Trust
- 2. Michael H. Dempsey is the trustee of the Naomi C. Dempsey Charitable Lead Annuity Trust.
- 3. Michael H. Dempsey is the trustee of the Naomi C. Dempsey Trust.
- 4. These shares are held in a trust for the benefit of 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 purposes of Section 16 or for any other purpose.
- 5. Michael H. Dempsey is the trustee of the Judith D. Hook Florida Intangibles Trust.

Michael H. Dempsey by John K. Dieker pursuant to a Power of Attorney filed with the

01/11/2005

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.