FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	
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OIVID AFFINOVAL									
OMB Number:	3235-0287								
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

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* ROSE B ANDREW				2. Issuer Name and Ticker or Trading Symbol GREIF, INC [GEF, GEF-B]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 425 WINTER RD.					3. Date of Earliest Transaction (Month/Day/Year) 08/26/2024								7		er (give title			specify	
(Street) DELAWARE OH 43015 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								<u>/</u>				
	Table	I - Nor	n-Deriva	tive S	Secur	rities	Acq	uired,	Disp	osed of	, or B	Benef	iciall	y Own	ed				
Date					Execution Date,							, 4 and Secu Bene Owne		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A) (D)		rice	Transa	saction(s)			(IIISU. 4)					
Class A Common Stock 08/26/2							2024			1,484	A	\	\$0 ⁽¹⁾	1	,484		D		
Class B Common Stock															0		D		
	Tal													Owne	d				
cle of cative price of Date (Month/Day/Year) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)				ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration			Amour		Derivative Security (Instr. 5)				Form: Direct (D) or Indirect	11. Nature of Indirect Beneficia Ownership (Instr. 4)		
	common St Conversion or Exercise Price of Derivative	(State) (2 Table ecurity (Instr. 3) Dommon Stock Dommon Stock Tal 2. Conversion or Exercise Price of Derivative Only 1	(State) (Zip) Table I - Nonecurity (Instr. 3) December Stock Table II - Conversion or Exercise (Month/Day/Year) Defend to the conversion of Exercise (Month/Day/Year) Table II - Conversion or Exercise (Month/Day/Year) Table II - Conversion or Exercise (Month/Day/Year)	Table I - Non-Deriva ecurity (Instr. 3) 2. Transar Date (Month/Date (Month/Date (Month/Date (e.g., pt 2. Transar Date (Month/Date (Month/Date (Month/Date (Month/Date (Month/Day/Year)) 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year)	Table I - Non-Derivative Security (Instr. 3) 2. Transaction Date (Month/Day/Year) Date (e.g., puts, cather) 2. Table II - Derivative Secution Date (e.g., puts, cather) Conversion or Exercise Price of Derivative of Derivative of Derivative of Derivative (Month/Day/Year) 3. 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Explanation of Responses:

1. Transaction reflects a restricted stock award made to the Reporting Person pursuant to the terms of the Issuer's outside directors' equity award plan. The shares are subject to restriction until the earlier of August 26, 2027, or the Reporting Person's termination from the Board due to his retirement, death or other reason.

> B. Andrew Rose by Gary R. Martz pursuant to a POA filed 08/27/2024 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.