FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* DEMPSEY MICHAEL H						2. Issuer Name and Ticker or Trading Symbol GREIF INC [GEF,GEF,B]								(Che	5. Relationship of Reporting Person(s) to (Check all applicable) X Director X 10%				Owner
(Last) (First) (Middle) 425 WINTER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 04/11/2005									Offic belov	er (give title w)	9	Other below	(specify)	
(Street) DELAWA (City)			43015 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	sposed o	f, or E	Benefi	cially	y Own	ed			
			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securitie Disposed C 5)	nd Securities Beneficially Owned Follow		es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
				Code			v	Amount	(A) o	r Pric	е	Reported Transaction(s) (Instr. 3 and 4)		(In		(Instr. 4)			
Class B C	ommon Sto	ock	04/11/2005 G 625 D \$0.00 ⁽¹⁾ 108,710 I			See footnote. ⁽⁴⁾													
Class A Common Stock														8	374		D		
Class B C	ommon Sto	ck													50	507,657 D			
Class A C	ommon Sto	ock													2,	2340 1 1 1			See footnote. ⁽²⁾
Class B C	ommon Sto	ck													5,375,904 I				See footnote. ⁽²⁾
Class B Common Stock													420			T I	See footnote. ⁽³⁾		
		Ta	ıble II -								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		on Date,	4. Transac Code (Ir 8)		on of		6. Date Exerc Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	erivative ecurity istr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	y Owne Form Direct or Ind (I) (In:	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Cada	.,	(0)	(D)	Date		Expiration	Tial -	or Number of								

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 Trust.
- 3. 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.
- 4. Michael H. Dempsey is the Trustee of the Naomi C. Dempsey Charitable Lead Annuity Trust.

Michael H. Dempsey by John
K. Dieker pursuant to a POA 04/11/2005 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.