### Edgar Filing: GREIF INC - Form 4

GREIF INC Form 4 December 11 FORM Check thi if no long subject to Section 14 Form 4 of Form 5 obligation may conti <i>See</i> Instru 1(b).	<b>4</b> UNITE Solution Solution Solution UNITE STAT State Solution	<b>EMENT O</b> pursuant to 17(a) of the	Was OF CHAN Section 10	hington, GES IN I SECUR 6(a) of the ility Hold	D.C. 205 BENEFI ITIES e Securiti ling Com	549 CIA es Ex pany	L OW	COMMISSION /NERSHIP OF ge Act of 1934, of 1935 or Section 40	OMB Number: Expires: Estimated burden hou response	urs per		
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> McAlpin Mary T.			2. Issuer Name <b>and</b> Ticker or Trading Symbol GREIF INC [GEF, GEF-B]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
65 EAST STATE STREET, SUITE 2100			(Month/Day/Year) 12/07/2015					Director     X 10% Owner       Officer (give title     Other (specify below)				
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Executi any	emed ion Date, if /Day/Year)	Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) c l of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Class B Common Stock	12/07/2015			G	885 <u>(1)</u>		\$ 0	3,346,148	D			
Class A Common Stock								940	D			
Class B Common Stock								23,334	Ι	See Footnote $(2)$		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						<sup>×</sup>
					4, and 5)						
					,,						
									Amount		
						Date	Expiration		or		
							•	Title	Number		
						Excicisable	Dute		of		
				Code V	(A) (D)				Shares		
				Code V	, ,	Date Exercisable	Expiration Date	Title	Number of		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
		Director	10% Owner	Officer	Other			
McAlpin Mary T. 65 EAST STATE STREET, SU COLUMBUS, OH 43215	UITE 2100		X					
Signatures								
/s/ Mary T. McAlpin	2/11/2015							

<u>\*\*</u>Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Distribution from a trust to the reporting person as a beneficiary of such trust.
- (2) As sole trustee for a family trust.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.