FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT	OF C	HANGES	IN BEN	IEFICIAL	OWNER	SHIP

OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:								

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

Name and Address of Reporting Person* Ryan Christopher Michael				2. Issuer Name and Ticker or Trading Symbol Gevo, Inc. [GEVO]							eck all applic Directo	tionship of Reporting all applicable) Director		10% Ow	wner				
(Last)	`	First) NVERNESS DF	(Middle)	TH	3. Date of Earliest Transaction (Month/Day/Year) 08/03/2023)	Officer below)	(give title Presider	Other (specify below)		pecity			
BUILDING C, SUITE 310				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	WOOD C	0	80112)	X Form filed by One Reporting Person Form filed by More than One Reporting Person			- 1				
(City)	2)	State)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									to					
		Tal	ble I - No	n-Deriv	ative	e Se	ecurities	s Ac	quired, [Disp	osed c	of, or	Bene	eficially	y Owned				
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				Execution Date,		Transaction Dispose Code (Instr. 5)		urities Acquired (A) sed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	es Forr ially (D) of Following (I) (II		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)				
						Code	v			(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Common Stock ⁽¹⁾ 08/03/				3/2023	3			A		266,2	5,220 A \$0 1,278,279		8,279		D				
	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)	3A. Deemed Execution I if any (Month/Day	Date, Transa Code (I		saction e (Instr. Secur Acqui or Dis of (D)		Derivative Ex		6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)
				Code	ode	v	(A)	(D)	Date Exercisable		opiration ate	Title	OI N	mount umber Shares		Transaction(s) (Instr. 4)			
Stock Option	\$1.75	08/03/2023			A		266,220		(2)	08	3/02/2033	Comm		66,220	\$0	266,22	10	D	

Explanation of Responses:

- 1. Represents restricted common stock that vests in three equal annual installments beginning on the first anniversary of the grant date, provided that the reporting person remains in continuous service with the
- 2. Represents stock options that vest in three equal annual installments beginning on the first anniversary of the grant date, provided that the reporting person remains in continuous service with the issuer as of each vesting date.

Remarks:

/s/ Geoffrey T. Williams, Jr., Attorney-in-Fact

08/04/2023

** 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.