	FORM	4	UNITED) STA	TES	S S			ES AN			NG	ECC	OMMI	SSION					
							v	vasiii	ngton, D.t	5. 205	+5						OMB APPROVAL			
Section	this box if no lo 1 16. Form 4 or	NT OF CHANGES IN BENEFICIAL OWNERSHIP												OMB Number: 3235-0287 Estimated average burden						
	ions may contii tion 1(b).	nue. See		File	d purs or	suant Sect	to Section	n 16(a of the	a) of the S Investme	ecurit nt Co	es Exchar npany Act	ige A of 19	ct of 193 940	4		hours	per resp	onse:	0.5	
1. Name and Address of Reporting Person $\overset{*}{}$ Nurmat Alisher K					2. Issuer Name and Ticker or Trading Symbol <u>Gevo, Inc.</u> [GEVO]										elationship eck all applic Directo	cable)	Reporting Person(s) to Issue le) 10% Owr			
(Last) (First) (Middle) C/O GEVO, INC. 345 INVERNESS DRIVE SOUT				OUTH	3. Date of Earliest Transaction (Month/Day/Year) 05/22/2024										X Officer (give title Other (specify below) below) VP Accounting and Treasurer				. ,	
BUILDING C, SUITE 310															. Individual or Joint/Group Filing (Check Applicable ine)					
(Street) ENGLEWOOD CO 80112																iled by Mo	ed by One Reporting Person ed by More than One Reporting			
(City) (State) (Zip)					R	ule	10b5-	1(c)) Trans	sact	ion Ind	ica	tion							
						Che satis	ck this box sfy the affir	to ind mative	icate that a defense c	a transa onditio	action was n ns of Rule 1	nade j 0b5-1	pursuant 1(c). See	to a conti Instructio	ract, instructio n 10.	n or written	plan that	is intended	to	
		Tab	ole I - Nor	n-Deriv	ativ	e Se	curitie	s Ac	quired	, Dis	posed c	of, o	r Ben	eficial	y Owned					
1. Title of Security (Instr. 3) 2. Trans. Date (Month/L						2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Beneficia Owned F	es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock ⁽¹⁾ 05/2				05/22	/202	24			Α		95,90)6	Α	\$ <mark>0</mark>	200	200,825		D		
Common Stock															15,31	15,314.23 ⁽²⁾		I	By 401(k) Plan	
		•	Table II -								osed of onverti				Owned			<u> </u>		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/E	on Date		7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	S Form Ily Direc or Inc (I) (In	Ownership	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exercisa		Expiration Date									

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 issuer as of each vesting date.

2. Between January 1 and May 22, 2024, the reporting person acquired 15,314.23 shares of the issuer's common stock under the issuer's 401(k) plan. The information in this report is based on a plan statement dated May 22, 2024.

3. The stock options shall 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; provided, further, that any vested portion of such option shall only be exercisable by the reporting person if the daily volume weighted average price of the issuer's common stock during any 20 consecutive trading day period after the grant date and prior to May 21, 2034 equals or exceeds \$1.00.

Remarks:

/s/ E. Cabell Massey, Attorney-05/24/2024 in-Fact

** 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.