SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

| 1. Name and Address <u>Ryan Christop</u> | s of Reporting Person [°] her Michael | * | 2. Issuer Name and Ticker or Trading Symbol Gevo, Inc. [GEVO] | | ionship of Reporting Perso all applicable) Director Officer (give title | n(s) to Issuer 10% Owner Other (specify |
|---|---|------------------------|--|-------------------------|--|---|
| (Last) GEVO, INC., 345 BUILDING C, SI | (First) 5 INVERNESS DF UITE 310 | (Middle) RIVE SOUTH | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2018 | А | below) President and C | below) COO |
| (Street) ENGLEWOOD (City) | CO (State) | 80112 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) X | dual or Joint/Group Filing (Form filed by One Repor Form filed by More than Person | ting Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any | Code (Instr. | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
|---------------------------------|--|--------|--------------|---|--------|---------------|--------|---|---|---|--|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | |
| Common Stock ⁽¹⁾ | 08/09/2018 | | A | | 10,000 | A | \$0.00 | 10,158 | 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 Date, if any (Month/Day/Year) | 4. Transa Code (8) | Instr. | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|--------|--------|-----|--|--------------------|---|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Appreciation Right | \$3.45 | 08/09/2018 | | A | | 64,333 | | (2) | 08/09/2028 | Common Stock | 64,333 | \$0.00 | 64,333 | D | |

Explanation of Responses:

1. Represents restricted common stock that vests 100% on August 9, 2019.

2. One-third (1/3) of the award vests on the grant date and one-third (1/3) of the award shall vest on each of the first and second anniversaries of the grant date thereafter.

Remarks:

<u>/s/ Geoffrey T. Williams,</u> <u>Attorney-in-Fact</u>

08/13/2018

** 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.