FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: 0.5 | | | | | | | | |

| | Check this box if no longer subject |
|---|-------------------------------------|
| ١ | to Section 16. Form 4 or Form 5 |
| | obligations may continue. See |
| | Instruction 1(b). |

| | | | or Sec | ction 30(h) of the In | vestment Con | npany Act of 1940 | | | | |
|------------------------------------|------------|----------------------|--|---|---|--------------------|------------------------|---|---|---|
| 1. Name and Addres Cesarek Timo | | son* | | uer Name and Tick o, <u>Inc.</u> [GEV(| | Symbol | | tionship of Reporting all applicable) Director | 10% (| Owner |
| (Last) C/O GEVO, INC SOUTH | | (Middle) ESS DRIV | 0.070 | e of Earliest Transa 4/2020 | action (Month/ | Day/Year) | X | Officer (give title below) Chief Comm | other below nercial Office | ' |
| BUILDING C, S (Street) ENGLEWOOD | | 80112 | 4. If A | mendment, Date of | Original Filed | l (Month/Day/Year) | 6. Indiv Line) X | ridual or Joint/Grou Form filed by On Form filed by Mo Person | e Reporting Per | son |
| (City) | (State) | (Zip) | | | | | | | | |
| | Ta | ble I - No | n-Derivative S | ecurities Acq | uired, Dis _l | oosed of, or Benef | icially | Owned | | |
| 1. Title of Security | (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |

| | | | | | | | | | Code | v | Amount | (A) (D) | or Pri | ce | Transa (Instr. 3 | ction(s) 3 and 4) | | | , |
|--|---|--|-------------------|--|-------|---|--|--|------------------|------|--------------------|--|---|---------------------|---|--|--|--|--|
| Common Stock 06/24 | | | | 06/24/ | /2020 | | | | F ⁽¹⁾ | | 25,658 | Г | \$ | 1.08 | 18 | 9,477 | | 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) | Executi if any | ecution Date, iny Code (Instr. I onth/Day/Year) 8) S | | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | of Expiration Date (Month/Day/Year) Securities Acquired (A) or | | | | 7. Title Amou Secur Under Deriva Secur 3 and | int of rities rlying ative rity (Inst | Deri Sec (Ins | rice of ivative curity ctr. 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 Exercisa | able | Expiration Date | Title | Amour or Number of Shares | er | | | | | |
| Explanation | n of Respons | ses: | | | | | | | | | | | | | | | | | |

1. Represents shares withheld by the issuer to cover tax withholding obligations upon vesting of a restricted stock award.

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

06/26/2020

** 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.