FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | | ОМ |

| l | OMB APPRO | VAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average burde | en |
| l | hours per response: | 0.5 |

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* Mize Gary W. | | | | | | 2. Issuer Name and Ticker or Trading Symbol Gevo, Inc. [GEVO] | | | | | | | | | | neck all app | , | ng Per | rson(s) to Is: 10% O Other (| wner |
|---|---|--|--|---------------------|---|--|--------|--|---|-------------------------------------|------|---|-----------------------------------|---|----------------------------|---|---|--|---|--|
| (Last) (First) (Middle) GEVO, INC., 345 INVERNESS DRIVE SOUTH | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/29/2016 | | | | | | | | | | belo | v) ⁻ | | below) | |
| BUILDING C, SUITE 310 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) ENGLEWOOD CO 80112 | | | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (| State) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Noi | n-Deriv | ative | Sec | curiti | es Ac | qui | ired, C | Disp | osed | of, or | Ben | eficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Tran: Date (Month | | | | | Execution Day/Year) if any | | | . Deemed ecution Date, iny onth/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 ar | | | d Securi Benef Owner | cially I Following | Forn (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | G | Code | v | Amount | : (| A) or D) | Price | | etion(s) and 4) | | | (Instr. 4) |
| Common Stock 07/29/ | | | | | | 2016 | | | | M | | 357 | | A | (1) | 1 | 11,110 | | D | |
| Common Stock 07/29/2 | | | | | /2016 | 2016 | | | | F 114 | | (2) D \$ | | \$0.5 | 53 10,996 | | | D | | |
| | | 7 | able II - | Derivat (e.g., p | | | | | | | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | i. Fransaction Code (Instr. 3) | | ı of | | 6. Date Exercisal Expiration Date (Month/Day/Year | | | | Amou Securi Under Deriva | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct (or Indir (I) (Inst | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exer | e rcisable | | piration ite | Title | 0 N 0 | lumber | | | | | |
| Restricted Stock | (1) | 07/29/2016 | | | м | 357 | | | (3) | | (3) | Comm | on | 357 | \$0.00 | 8 558 | | D | | |

Explanation of Responses:

- 1. Restricted Stock Units convert into common stock on a one-for-one basis
- 2. The disposition represents the net settlement of shares upon the vesting of restricted stock units.
- 3. On September 16, 2015, the reporting person was granted restricted stock units and options that will vest monthly for three years beginning July 29, 2015.

Remarks:

/s/ Geoff Williams, as Attorney-in-Fact 08/02/2016

** 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.