### FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	
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OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

# 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

1. Name and Address of Reporting Person* Schatzman Matthew K						2. Issuer Name <b>and</b> Ticker or Trading Symbol NextDecade Corp. [ NEXT ]									5. Relationship of Reporting Person(s) to Issu (Check all applicable)    Director				
(Last) 1000 LO	(F UISIANA	3. Date of Earliest Transaction (Month/Day/Year) 08/30/2024										Officer (give title Other (specify below) below)  Chief Executive Officer							
(Street) HOUST(	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person								
		Ta	ble I - Non	n-Deriv	ative \$	Secur	ities	s Acq	quired,	Dis	posed o	of, or B	enef	icially	Owned				
I - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				4 and 5) Securities Beneficial Owned Fo		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 08/30					2024		A		409,09	0(1)	A	\$ <mark>0</mark>	4,870	0,468		D			
Common Stock 08/30				08/30	/2024		F		88,666	5(2)	D	\$4.66	4,78	31,802		D			
			Table II - I								osed of				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Co	ansactio de (Insti	n Der r. Sec Acc or I of (	Derivative		6. Date Exercisa Expiration Date (Month/Day/Yea		)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode V	(A)			Date Exercisab		Expiration Date	Title	or Nu	nount mber Shares		(Instr. 4)	1011(9)		
Employee Stock Option (right to buy)	\$10	08/30/2024		I	A		,090		08/31/202	27 (	08/30/2034	Common Stock			\$0	409,090		D	

### **Explanation of Responses:**

1. Shares are represented by restricted stock units. Each restricted stock unit represents a contingent right to receive one share of common stock of the Issuer. The restricted stock units vest in three near-equal annual installments beginning August 31, 2025.

2. Represents shares of common stock withheld by the Issuer to satisfy tax withholding obligations in connection with the vesting of restricted stock units on August 30, 2024.

### Remarks:

/s/ Vera de Gyarfas, Attorneyin-fact

09/04/2024

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\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\ast}$  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.