### MAPES MICHELLE

Form 5

March 11, 2011

#### **OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer MAPES MICHELLE Symbol Green Plains Renewable Energy, Inc. (Check all applicable) [GPRE] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner X \_ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2011 Exe VP - Gen Counsel Corp Sec 9420 UNDERWOOD AVE., SUITE 100 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) OMAHA. NEÂ 68114 \_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 5. Amount of 6. 7. Nature of 4. Securities Acquired Indirect Security (Month/Day/Year) Execution Date, if Transaction (A) or Disposed of (D) Securities Ownership (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Direct Beneficial (Month/Day/Year) (Instr. 8) Owned at end (D) or Ownership of Issuer's Indirect (I) (Instr. 4)

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

03/07/2011

03/07/2011

Â

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Common

Common

Stock

Stock

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 control number.

Price

\$0

(A)

or

(D)

Α

D

Amount

10,000

787

 $A4^{(1)}$ 

 $F4^{(2)}$ 

Fiscal Year

(Instr. 3 and

14,661

13,874

4)

(Instr. 4)

D

D

SEC 2270 (9-02)

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
		Derivative				Securities			(Instr.	3 and 4)	
		Security				Acquired					
						(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
										A 4	
										Amount	
							Date Exercisable	Expiration Date	Title	or	
										Number	
						(A) (D)				of	
						(A) (D)				Shares	

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## **Reporting Owners**

Reporting Owner Name / Address	Kelationships						
	Director	10% Owner	Officer	Other			
MAPES MICHELLE 9420 UNDERWOOD AVE., SUITE 100 OMAHA, NE 68114	Â	Â	Exe VP - Gen Counsel Corp Sec	Â			

# **Signatures**

/s/ Michelle
Mapes

\*\*Signature of Reporting Person

O3/11/2011

Date

# **Explanation of Responses:**

- \* 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).
- (1) Date at which first vesting occurs is indicated. One-quarter of the total shares vest at the grant date and an additional 1/4 vest on each of the next three anniversaries thereafter.
- (2) Disposition reported represents tax withholding on portion of grant that vests on date indicated.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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