| SEC For | rm 4 | | | | | | | | | | | | | | | | | |
|---|---|--|------------------------|--|--|--|-------------------|---|-------------------|--|----------------------|---|--|---|--|---|---|---------------------------------------|
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | | | | _ | ATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | | OMB APPROVAL | | |
| | | | | ed purs | AT OF CHANGES IN BENEFICIAL OWNER d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | Estim | Estimated average burden | | 3235-0287 n 0.5 | |
| 1. Name and Address of Reporting Person [*] Comora Mark S | | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>OPAL Fuels Inc.</u> [OPAL] | | | | | | | | Relationship eck all applie X Directo | cable) | ig Pers X | () | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2023 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify |
| ONE NORTH LEXINGTON AVE, 14TH FLOOR (Street) | | | | - 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| WHITE PLAINS | N | Y | 10601 | | | | 1065 1 | 1(0) | Trana | | ion Indi | iantian | | Form f Persor | | re than | I One Repo | rting |
| (City) (State) (Zip) | | | | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| 4 7464 | 0 | | le I - Nor | | | - | CURITIES | | quired, | Dis | - | - | | ly Owned | | 6.00 | m e ne him | 7 Natura |
| 1. Title of Security (Instr. 3) Date (Month/ | | | | ay/Year) ZA. Deemed Execution Date, if any (Month/Day/Year) | | | Transa Code (I | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) or d Of (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Followin Reported | | Form: Direct (D) or Indirect g (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | Price | Transact (Instr. 3 | tion(s) | | | (Instr. 4) |
| | | ŗ | Fable II - | | | | | | | | osed of, onvertil | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 4. Transa Code (8) | | of | | Expiration | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title ar Amount of Securities Underlyir Derivativo Security and 4) | of s ig e | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy g | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

(1)

1. The Reporting Person was granted restricted stock units ("RSUs"), which represent a contingent right to receive one share of Common Stock for each RSU. The RSUs vest 100% on March 31, 2024, provided that the Reporting Person remains in continuous service on the vesting date.

(1)

Remarks:

Restricted Stock Units

| /s/ John Coghlin as Attorney- | 04/04/2022 |
|-------------------------------|------------|
| in-Fact | 04/04/2023 |

19,369

\$6.97

(1)

Class A

commoi stock

29,494

D

** 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).

03/31/2023

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

A

19,369

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.