FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer					
					L		~-							(Check all app	licable)			
Pender Robe	ert B				Ve	ntu	re Glo	bal, Inc	:.[VG]								
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)									_X_ Director _X_ 10% Owner				
(Last) (Last) (Last)														X_Officer (give title below) Other (specify below)				
C/O VENTURE GLOBAL, INC., 1001						6/30/2025								See Remarks				
19TH STRE																		
DING	(Stree		11121,	300	и <u>т</u>	fΛm	endme	nt, Date O	riair	al File	ed (MM/D	D/VVX	/V)	6. Individual c	r Ioint/G	roup Filing	(Chaole Anni	iaabla Lina)
		,			7. 1	тАп	ichamic	in, Daic O	ngn	iai i iiv	a (MM/D	D/111	11)	o. marviduai c	n joniu G	roup rining	(Check Appl	icable Line)
ARLINGTON, VA 22209												X Form filed by One Reporting Person						
(City) (State) (Zip)				1							Form filed by More than One Reporting Person							
(37 (, (. ,		-1													
			Table I	I - Non-	Der	ivati	ve Seci	rities Acc	mir	ed. Di	sposed o	f. or	Ren	eficially Owne	d			
1. Title of Security				2. Trans. I			Deemed	3. Trans. Co	•	<u>, </u>	•					ally Owned	6.	7. Nature
(Instr. 3)				Exect		ion (Instr. 8)		or Disposed of (D)) `	F				Ownership	of Indirect		
			Date.		if any			(Instr.	(Instr. 3, 4 and 5)		(Beneficial Ownership			
													-				or Indirect	(Instr. 4)
								Code	v	Amou	(A) or nt (D)	Pric					(I) (Instr. 4)	
Class A Common S	tock			6/30/20	25			P	<u> </u>	1,22	_ ` /	\$15.9	_			1,187,111	D	
Ciass II Common S	tock			0/20/20	20				<u> </u>	1,22	71	910.	,5			1,107,111		
	Tah	le II - Der	ivative	Securi	ties l	Rene	ficially	Owned (o a	nute	calle we	rran	te d	options, conver	tible seci	rities)		
1 Title of Desirents	_							,	0 /					. ,		9. Number of	10.	11. Nature
1. Title of Derivate 2. 3. Trans. 3A. Deemed 4. Trans. Security Conversion Date Execution Conversion C			tr. 8)	Code									Derivative		Ownership			
(Instr. 3)	or Exercise		Date, if a	any			Acquired (A) or Disposed of (D)		Deri				erivative Security nstr. 3 and 4)			Securities Beneficially	Form of Derivative	Beneficial Ownership
Price of Derivative Security						4 and 5)				(Insu	. 5 ar	nd 4)	4) (Instr. 5)		Security:	(Instr. 4)		
														Following	Direct (D)			
									Date		Expiration	Title		ount or Number of		Reported Transaction(s)	or Indirect (I) (Instr.	
				C	ode	V	(A)	(D)	Exe	rcisable	Date	11110	Sha	res		(Instr. 4)	4)	

Explanation of Responses:

Remarks:

Mr. Robert Pender's title is Executive Co-Chairman, Founder, and Executive Co-Chairman of the Board of Directors of the Issuer.

Reporting Owners

reporting owners								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Pender Robert B								
C/O VENTURE GLOBAL, INC.	X	X	See Remarks					
1001 19TH STREET NORTH, SUITE 1500	71	21	See Remarks					
ARLINGTON, VA 22209								

Signatures

/s/ Keith Larson, as Attorney-in-Fact for Robert Pender

7/2/2025

Date

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

^{**}Signature of Reporting Person

- * 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 control number.