Edgar Filing: Ameresco, Inc. - Form 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue STATEMENT STATEMENT	ES SECURITIES AND EXCHANGE (Washington, D.C. 20549 OF CHANGES IN BENEFICIAL OW SECURITIES o Section 16(a) of the Securities Exchangue Public Utility Holding Company Act of h) of the Investment Company Act of 19	NERSHIP OFStateStateStateNERSHIP OFExpires:January 31, 2005Estimated average burden hours per responseStatege Act of 1934, f 1935 or Section0.5
(Print or Type Responses)		
1. Name and Address of Reporting Person <u>*</u> Sakellaris George P	2. Issuer Name and Ticker or Trading Symbol Ameresco, Inc. [AMRC]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) (First) (Middle) C/O AMERESCO, INC., 111 SPEEN STREET, SUITE 410	3. Date of Earliest Transaction (Month/Day/Year) 06/02/2014	X DirectorX 10% Owner X Officer (give title Other (specify below) below) President and CEO
(Street) FRAMINGHAM, MA 01701	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 	
(City) (State) (Zip)	Table I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned
(Instr. 3) any		5. Amount of 6. 7. Nature of Securities Ownership Indirect Beneficially Form: Direct Beneficial Owned (D) or Ownership Following Indirect (I) (Instr. 4) Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)
Class A Common 06/02/2014 Stock	$P = 50,000 \text{ A } \frac{6.452}{(1)}$	
Class A Common Stock		925,000 I By trust (2)

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

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships				
1	Director	10% Owner	Officer	Other	
Sakellaris George P C/O AMERESCO, INC. 111 SPEEN STREET, SUITE 410 FRAMINGHAM, MA 01701	Х	Х	President and CEO		
Signatures					
David J. Corrsin, Attorney-in-fact	06/03/2	2014			

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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$6.41 to \$6.50, inclusive. The reporting person undertakes to provide to Ameresco, Inc., any security holder of Ameresco, Inc., or the

(1) staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (1) to this Form 4.

Shares held by a trust for the benefit of the reporting person's children, who share reporting person's household. The reporting person may be deemed the beneficial owner of the shares held by the trust. The reporting person disclaims beneficial ownership of the shares held by

(2) the trust, and this report should not be deemed an admission that the reporting person is the beneficial owner of the trust's shares for purposes of Section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space 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.

**Signature of Reporting Person