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| | | | | | | | | PPROVAL 3235-0287 January 31, 2005 verage rs per 0.5 | |
|--|--|---|---|------------------|---|---|--|--|--|
| (Print or Type Responses) |) | | | | | | | | |
| 1. Name and Address of Sakellaris George P | Symbol | 2. Issuer Name and Ticker or Trading ymbol Ameresco, Inc. [AMRC] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First C/O AMERESCO, I SPEEN STREET, SV | 3. Date of Earliest Transaction Month/Day/Year))5/15/2014 | | | | X DirectorX 10% Owner X Officer (give title Other (specify below) below) President and CEO | | | | |
| (Stree FRAMINGHAM, M | 4. If Amendment, Da Filed(Month/Day/Year) | endment, Date Original onth/Day/Year) | | | | 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-D | erivative S | ecuri | ties Aca | uired, Disposed of | . or Beneficial | lv Owned | |
| | Title of ecurity2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if | | 4. Securition(A) or Dis (Instr. 3, 4 | ies Ac sposed | quired of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A Common 05/15/2 Stock | 2014 | Code V P | Amount 10,000 | (D) | Price \$ 5.82 (1) | (Instr. 3 and 4) 2,745,626 | D | | |
| 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 | | | | | | |
|--|---------------|-----------|-------------------|-------|--|--|--|
| F | 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 | 05/16/2 | 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 \$5.80 to \$5.84, 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