FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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02)

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

(Print or Type Responses)										
1. Name and Address of Reporting P Foy Douglas I	2. Issuer Name a Ameresco, Inc.			ading Sy	mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner			
(Last) (First) C/O AMERESCO, INC., 111 S SUITE 410	(Middle) PEEN STREET,	3. Date of Earliest 05/12/2015	Transactio	on (M	lonth/Day	/Year))	Officer (give title below)	Other (specify b	elow)
(Street) FRAMINGHAM, MA 01701		4. If Amendment,	Date Origi	nal F	iled(Month	n/Day/Ye	ear)	6. Individual or Joint/Group Filin _X_Form filed by One Reporting Person Form filed by More than One Reporting		ible Line)
(City) (State)	(Zip)	Tab	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Beneficial
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Class A Common Stock	05/12/2015		Р		1,000	А	\$ 6.594 <u>(1)</u>	10,000	D	

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

SEC 1474 (9-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.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Nun	nber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n of	f		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	eriva	tive	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	ecurit	ties			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Α	cquir	red			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(/	A) or				4)			Following	Direct (D)	
					D	ispos	sed						Reported	or Indirect	
						f (D)							Transaction(s)	< / <	
						nstr.							(Instr. 4)	(Instr. 4)	
					4,	, and	5)								
											Amount				
								Date	Expiration Date	Title	or Number				
								Exercisable	Date		of				
				Code V	/ (.	A) ((D)				Shares				

Reporting Owners

Barrella Oran Name (Addams	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Foy Douglas I C/O AMERESCO, INC. 111 SPEEN STREET, SUITE 410 FRAMINGHAM, MA 01701	х						

Signatures

05/13/2015 David J. Corrsin, attorney-in-fact Date ----Signature of Reporting Person

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 \$6.59 to \$6.60, inclusive. The (1) reporting person undertakes to provide to Ameresco, Inc., any security holder of Ameresco, Inc., or the 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.

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.