FORM 4	
Check this box if no	

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

(Print or Type Pa

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 (b). Company Act of 1940

(Time of Type Respons	(3)											
1. Name and Address of WISNESKI FRAN	2. Issuer Name and Ticker or Trading Symbol Ameresco, Inc. [AMRC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) C/O AMERESCO, SUITE 410	^(First) INC., 111 SPEE	AT OTD DET	3. Date of Earliest Transaction (Month/Day/Year) 05/26/2016							ther (specify belo	w)	
FRAMINGHAM, N		4. If Amendment, Date Original Filed(Month/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)	Т	able I - No	on-De	rivative S	ecurities	es Acquired, Disposed of, or Beneficially Owned				
1. Title of Security		2. Transaction	2A. Deemed	3. Transact	tion	4. Securities Acquired 5. Amount of Securities Benefi				6.	7. Nature	
(Instr. 3)		Date	Execution Date, if	1			isposed c	of (D)	Owned Following Reported	Ownership	of Indirect	
		(Month/Day/Year)					Transaction(s)	Form:	Beneficial			
			(Month/Day/Year)						(Instr. 3 and 4)	Direct (D)	Ownership	
										or Indirect	(Instr. 4)	
							(A) or			(I)		
				Code	V	Amount	(D)	Price		(Instr. 4)		

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

Persons who respond to the collection of information SEC 1474 (9-02) 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

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title o	of 2.	3. Transaction	3A. Deemed	4.		5. Numb	er	6. Date Exer	cisable and	7. Title and	Amount of	8. Price of	9. Number of	10.	11. Nature
Derivati	ve Conversion	Date	Execution Date, if	Transact	tion	of		Expiration I	Date	Underlying	Securities	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivativ	ve	(Month/Day	/Year)	(Instr. 3 and	14)	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Securitie						(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquired	t					Security:	(Instr. 4)		
	Security					(A) or					0	Direct (D)			
						Disposed	1 of					1	or Indirect		
						(D) (In str. 2	4				Transaction(s)	< / L			
						(Instr. 3, and 5)	4,						(Instr. 4)	(Instr. 4)	
						und 5)					• •	•			
								Date	Expiration	Title	Amount or Number of				
				Code	v	(A)	(D)	Exercisable	Date	Inte	Shares				
~ .				Couc	v	(A)	(D)				Shares				
Stock										Class A					
Option	\$ 4.74	05/26/2016		А		10,000		(1)	05/25/2026		10 000 00	\$ 0	10,000	D	
(right to) \$ 7.77	05/20/2010		Α		10,000			03/23/2020	Stock	10,000.00	φU	10,000	D	
purchas	e)									STOCK					

Reporting Owners

Barradian Orman Nama (Addama	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WISNESKI FRANCIS V JR C/O AMERESCO, INC. 111 SPEEN STREET, SUITE 410 FRAMINGHAM, MA 01701	х							

Signatures

John W. Pickett, attorney-in-fact	05/31/2016
**Signature of Reporting Person	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).
- (1) Of the shares subject to the option, 20% vest on May 26, 2017, and the remainder vest in four equal installments on each of the subsequent four anniversaries of such date.

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.