FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 0.5				

longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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 ar																
1. Name and Address of Reporting Person *- WISNESKI FRANCIS V JR				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) (First) (Middle) C/O AMERESCO, INC., 111 SPEEN STREET, SUITE 410					3. Date of Earliest Transaction (Month/Day/Year) 08/17/2018							(give title belo	w)	Other (specify b	elow)	
(Street) FRAMINGHAM, MA 01701				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(State)	(Zip)		7	Гabl	e I - Non	-Der	ivative S	ecuriti	es Acqı	iired, Dispo	osed of, or	Beneficially	Owned	
1.Title of Security 2. Transaction Date (Month/Day/Y			Execut any	ution Date, if		Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		d of (D)	D) Beneficially Owned Following Reported Transaction(s)		Following	Ownership of Form:	7. Nature of Indirect Beneficial	
				(Monti	n/Day/Yea	ar)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Class A C	Common St	tock	08/17/2018				G		5,000	D	\$ 0	97,676			D	
Class A C	Common St	tock	12/04/2018				S		2,000	D	\$ 15.401 (1)	95,676			D	
D 1 1																
indirectly.	Report on a	separate line	for each class of sec	curities l	beneficial	ly ov	wned dire	ctly o	or							
	Report on a	separate line	for each class of sec	curities l	beneficial	ly ow		Pers	sons wh	n this	form a	re not req	uired to re	formation espond un	ess	EC 1474 (9- 02)
	Report on a	separate line	Table II -	Derivat		rities	s Acquire	Person the	sons whatained if form dis	n this splays	form a a curr Benefici	re not req ently valid ally Owned	uired to re I OMB cor	spond un	ess	
	2. Conversion	3. Transaction	Table II - on 3A. Deemec Execution I	Derivat (e.g., pu	tive Secur its, calls, 4. Transactio Code	5 oon Oo D S S A (()	s Acquire rants, op	Person the ed, D tions	sons what in the sound in the s	n this splays of, or E tible se cisable on Date	Geneficies 7. An	re not req ently valid ally Owned	uired to re I OMB cor	espond un ntrol numb	of 10. Ownersl Form of Derivati Security Direct (I or Indire	02) 11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

	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	X						

Signatures

/s/ David J. Corrsin, attorney-in-fact	12/06/2018
**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).

 The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.40 to \$15.41, 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.