# FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
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Check this box 11 no 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

(Print or Type	e Responses)																
Name and Address of Reporting Person * Chiplock Mark				2. Issuer Name and Ticker or Trading Symbol Ameresco, Inc. [AMRC]								5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O AMERESCO, INC., 111 SPEEN STREET, SUITE 410				3. Date of Earliest Transaction (Month/Day/Year) 11/02/2020							ear)		X Officer (give title below) Other (specify below)  VP & CAO				
(Street)			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					
FRAMINGHAM, MA 01701 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							Securi	ties Acquire	red, Disposed of, or Beneficially Owned				
1.Title of Se (Instr. 3)	· · · · · · · · · · · · · · · · · · ·					3. Tra Code (Instr.	nsaction	or Disposed of (D		) Transaction(s)		ving Reported		Ownership Form:	Beneficial		
				(Month/I	Day/	Y ear)	Coo	de V	V A	Amount	(A) or (D)	Price	or Inc (I)			indirect (Instr. 4)	
Class A C	ommon St	ock	11/02/2020				M	[	2	2,094	A	\$ 12.35	2,094	4		D	
Class A C	ommon St	ock	11/02/2020				SC	D	2	2,094	D	\$ 38.735 (2)	5 0		D		
			Table II -					in a quired,	this curr Disp	form a rently v	are not alid OM	required to the second reduced reduced to the second reduced reduced to the second reduced r					1474 (9-02)
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. Transac Code	etion	5. No of Deri Secu Acqu (A) o Disp of (E	vative urities uired or losed D) r. 3, 4,	Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)  Beneficia Owned Followin Reported Transacti (Instr. 4)		Ownership Form of Derivative Security: Direct (D) or Indirect			
				Code	V	(A)	(D)	Date Exerci	sable	Expira Date	ation	Title	Amount or Number of Shares				
Stock Option (right to purchase)	\$ 12.35	11/02/2020		М			2,094	<u>(2</u>	3)	10/2:	3/2028	Class A Common Stock	2,094.00	\$ 0	20,000	D	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Chiplock Mark C/O AMERESCO, INC. 111 SPEEN STREET, SUITE 410 FRAMINGHAM, MA 01701			VP & CAO				

## **Signatures**

/s/ David J. Corrsin, attorney-in-fact	11/03/2020
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) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 6, 2020.
- The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$38.32 to \$39.40, inclusive. The reporting person (2) 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 (2) to this Form 4.
- (3) Of the shares subject to the option, 20% vested on October 24, 2019, 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.