FORM 4

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

OMB APPR	OVAL
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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).

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 and Address of Reporting Person* Murley Thomas S			2. Issuer Name and Ticker or Trading Symbol Ameresco, Inc. [AMRC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner						
(Last) (First) (Middle) C/O AMERESCO, INC., 111 SPEEN STREET			3. Date of Earliest Transaction (Month/Day/Year) 05/20/2021					-	Officer (give to	itle below)	Other (s	specify below)			
(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						
	GHAM, M	IA 01701											-18		
(City)	(State)	(Zip)			1	Γable	I - Non-Der	rivative Securit	ties Acquire	d, Disposed o	f, or Benefi	cially Owned		
1.Title of Security 2. Transaction Date (Month/Day/Ye			2A. Deem Execution any (Month/Da		Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Transaction(s)		Ov Fo	Ownership of B	eneficial	
					y/Year)	C	ode V	Amount (D)	l ì			or (I)	Indirect (I	wnership nstr. 4)	
Reminder: F	teport on a se	sparate fine for each	class of securities of		<u>,</u>			in this	ns who responder form are not ently valid ON	required to	respond ur				74 (9-02)
Reminder: F	eport on a se	parate mie toi caen		- Deriva	ative S	Securitie		in this a curre quired, Disp	form are not ently valid ON osed of, or Ben	required to IB control reficially Ov	respond ur number.				74 (9-02)
	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., p) 4. Transac Code	etion (Securitie alls, war	er er ative es d (A) sed	in this a curre quired, Disp s, options, co 6. Date Exeritation I (Month/Day	form are not ently valid ON osed of, or Ben onvertible secu rcisable and Date	required to IB control reficially Ov rities)	orespond ur number. wned Amount of Securities	nless the f	9. Number of	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., p) 4. Transac Code	etion (Securitie alls, war 5. Numb of Derivix Securitie Acquirec or Dispo of (D) (Instr. 3,	er er ative es d (A) sed	in this a curre quired, Disp s, options, co 6. Date Exeritation I (Month/Day	form are not ently valid ON osed of, or Ben onvertible securcisable and Date //Year)	required to IB control reficially Ov rities) 7. Title and Underlying	orespond ur number. wned Amount of Securities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Murley Thomas S C/O AMERESCO, INC. 111 SPEEN STREET FRAMINGHAM, MA 01701	X				

Signatures

David J. Corrsin, attorney-in-fact	05/24/2021
**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 29, 2021, 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.