

Advanced Emissions Solutions, Inc.
 Form 4
 November 08, 2013

FORM 4

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

OMB APPROVAL

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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Amrhein Christine B.

2. Issuer Name and Ticker or Trading Symbol
 Advanced Emissions Solutions, Inc.
 [ADES]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 9135 S. RIDGELINE BLVD.,
 SUITE 200, C/O ADA-ES, INC.
 (Street)

3. Date of Earliest Transaction
 (Month/Day/Year)
 11/06/2013

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 General Counsel & VP

HIGHLANDS RANCH, CO 80129

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				Code V	Amount (A) or (D) Price		
Common Stock	11/06/2013		A	164 ⁽¹⁾	A 37.96 ⁽²⁾	5,382 ⁽³⁾	D
Common Stock	11/06/2013		A	60 ⁽⁴⁾	A 37.69 ⁽²⁾	15,699 ⁽⁵⁾	I By Spouse

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

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 (9-02)

number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Amrhein Christine B. 9135 S. RIDGELINE BLVD., SUITE 200 C/O ADA-ES, INC. HIGHLANDS RANCH, CO 80129			General Counsel & VP	

Signatures

Christine B. Amrhein 11/08/2013

**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) Shares issued directly to Ms. Amrhein's qualified pension plan.
- (2) Price equals the fair market value of the shares on the date of authorization.
- (3) Of the amount shown, 798 shares are held in the qualified pension plan account of Ms. Amrhein and 3,104 shares were issued pursuant to a program under the Company's Equity Incentive Plan, are not fully vested and are subject to certain repurchase rights.
- (4) Shares issued directly to Mr. Amrhein's qualified pension plan.
- (5) Of the amount shown, 4,722 shares are held in the qualified pension plan account of Mr. Amrhein and 437 shares were issued pursuant to a program under the Company's Equity Incentive Plan, are not fully vested and are subject to certain repurchase rights.

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.