Advanced Emissions Solutions, Inc. Form 4 January 15, 2014

January 15, 2	2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
		~		shington,					Number:	3235-0287	
Check the if no long	ter								Expires:	January 31, 2005	
subject to Section 1 Form 4 o		SECUR	ITIES			NERSHIP OF	Estimated a burden hour response	verage			
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(	a) of the	Public U		ling Con	npan	y Act of	e Act of 1934, 71935 or Section 0	1		
(Print or Type F	Responses)										
DURHAM MICHAEL D Symb				Name and			-	5. Relationship of Reporting Person(s) to Issuer			
	Advanced Emissions Solutions, Inc. [ADES]					(Check all applicable)					
(Month/D				• •				X Director X Officer (give below)		Owner r (specify	
	ES, INC., 9135 S E BLVD., SUITI		01/13/2	014				Pres	sident & CEO		
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	g(Check	
HIGHLANI	OS RANCH, CO	80129	Filed(Mor	nth/Day/Year	)			Applicable Line) _X_ Form filed by C Form filed by M			
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or (D)	Price \$	(Instr. 3 and 4)			
Common Stock	01/13/2014			S	2,099 (1)	D	52.32 (2) (3)	257,723	D		
Common Stock	01/13/2014			S	1,201 (1)	D	\$ 53.05 (3) (4)	256,522 <u>(5)</u>	D		

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

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#### 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
DURHAM MICHAEL D C/O ADA-ES, INC. 9135 S. RIDGELINE BLVD., SUITE 200 HIGHLANDS RANCH, CO 80129	Х		President & CEO				
Signatures							
Michael D. Durham 01/15/2014							

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Shares sold pursuant to an existing 10b5-1(c) plan. (1)
- Represents the weighted average sale price of such shares. Sales were made at prices ranging from \$51.75 to \$52.7325. (2)
- The reporting person undertakes that he will provide, upon request by the U.S. Securities and Exchange Commission staff, the issuer, or a (3) security holder of the issuer, full information regarding the number of shares sold at each separate price.
- Represents the weighted average sale price of such shares. Sales were made at prices ranging from \$52.81 to \$53.4675. (4)
- Of the amount shown, 56,504 shares are held in the qualified pension plan account of the reporting person and 25,686 shares were issued (5) pursuant to the programs under the 2007 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.

\*\*Signature of

Reporting Person