FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287

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

Estimated average burden hours per response... 0.5

Transaction(s) (I)

(Instr. 4)

(Instr. 4)

Amount

Number

Shares

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 Ty	pe Respo	onses)														
				2. Issuer Name and Ticker or Trading Symbol Pacific Ethanol, Inc. [PEIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				3. Date of Earliest Transaction (Month/Day/Year) 08/13/2014						Officer (give title Other (specify below)				elow)		
SACRAN		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									
(City) (State) (Zip)				Table I -	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							l				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea	Execu any			Transaction (A		A) or Disposed of D) Instr. 3, 4 and 5)		Securities Beneficially Owne Following Reporte		Form:	7. Nat of Ind Benef D) Owne	irect icial		
					Code	V	Amoun	(A) or (D)	Price	Transaction(s (Instr. 3 and 4	/	or Indir (I) (Instr. 4	Ì	4)		
Common	Stock	08/13/2014			S		215	D	\$ 19.581	30,119		D				
Common	Stock	08/13/2014			S		400	D	\$ 19.598	29,719		D				
Reminder:		n a separate line fo	r each c	lass of securiti	ies benef	ficial	ly owned									
						ir re	nformat equired	ion c to re	ontaine spond	d to the colle d in this form unless the fo control numb	n are n rm dis	ot	`	1474 9-02)		
		Table II		ative Securiti puts, calls, wa	-		. •			eficially Owned	l					
1. Title of Derivative Security (Instr. 3)	Convers	ve (Month/Day/	Year) Ex	A. Deemed xecution Date, ny Month/Day/Ye	Cod	le	5. Num of Deriv Secu Acqu (A) o	ber vative rities nired	and Exp (Month)	Exercisable piration Date /Day/Year)	7. Title Amou Under Securi (Instr. 4)	nt of lying ties		9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Disposed

of (D)

(Instr. 3, 4, and 5)

Date

Exercisable Date

Expiration

Title

Reporting Owners

Donastina Ossa as Noma / Adduses	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kieta Douglas L 400 CAPITOL MALL SUITE 2060 SACRAMENTO, CA 95814	X						

Signatures

/s/ Douglas L. Kieta	08/13/2014			
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).

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.