FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average

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

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 Respon	ses)						-							
1. Name an Wright C		Symbol	2. Issuer Name and Ticker or Trading Symbol Pacific Ethanol, Inc. [PEIX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 400 CAPITOL MALL, SUITE 2060			Month/D	3. Date of Earliest Transaction (Month/Day/Year) 03/17/2015					_X_ Officer (give title Other (specify below) below) VP, Gen. Counsel & Secy				elow)		
(Street) SACRAMENTO, CA 95814				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)	(S	tate) (Zip)	Table	I - Non-D	erivat	ive Secu	rities	Acquir	ed, Disposed				ı		
1.Title of S (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code	8)	4. Secur Acquire Dispose (Instr. 3	ed (A) ed of (i, 4 an (A) or	or (D) d 5)	5. Amount of Securities Beneficially O Following Rep Transaction(s) (Instr. 3 and 4	orted	Form:	rect (Instr.	irect icial rship		
Common	Stock	03/17/2015		A		16,367	A	\$0	67,036		D				
directly or i	ndirectly.		erivative Secur	-	inforced, ired, i	ormatic quired t rrently Disposed	on co o res valid	ntaine spond u OMB o	•	n are rm di per.	not	(1474 9-02)		
(Instr. 3)		e (Month/Day/Year	3A. Deemed Execution Date, i) any (Month/Day/Yea	Code	Code		Number a		Exercisable iration Date Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 an 4)	unt of erlying rities	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownershij (Instr. 4)
				Coo	de V	(A)	I	Date Exercisa	Expiration ble Date	Title	or Number of Shares				
Repor	ting (Owners													

Donouting Orong Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Wright Christopher W 400 CAPITOL MALL, SUITE 2060 SACRAMENTO, CA 95814			VP, Gen. Counsel & Secy				

Signatures

/s/ Christopher W. Wright	03/18/2015
**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.