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

| OMB APP | ROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burden | | | | | | |
| hours per respor | ise 0.5 | | | | | |

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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | |
|--|--|--|--|--|-----------|--------------------|---------------------------|--|-------------------|--|--|---|---|---|---|--------------------|
| 1. Name and Address of Reporting Person * Koehler Paul | | | | 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 #2060 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2018 | | | | | | | | X Officer (give title below) Other (specify below) VP, Commodities & Corp Dev | | | | |
| (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) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqui | | | | | | | Acqui | ired, Disposed of, or Beneficially Owned | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | Exec | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. 8) | | 4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | Beneficially Owned F Reported Transaction (Instr. 3 and 4) | | Following (s) | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | V | Amou | (A) or (D) | Price | | or Indirect (I) (Instr. 4) | | (I) | (Instr. 4) |
| Common | Stock | | 04/01/2018 | | | | F | | 7,092 (1) | D | \$ 3 | 88,597 | | | D | |
| Reminder: indirectly. | Report on a | separate line fo | or each class of secu | rities | beneficia | ally o | | Personta | ons wl ained i | in this for | m are | not req | uired to re | formation espond unl ntrol numb | ess | EC 1474 (9- 02) |
| | | | Table II - D | | | | es Acquire rrants, opt | | • | | | ly Owned | l | | | |
| Security | 2. 3. Transac Conversion or Exercise Price of Derivative Security 3. Transac (Month/Da | | 3A. Deemed Execution Da | 4. Transaction Code Year) (Instr. 8) | | 5. Number of | 6. Da | n. Date Exercisable nd Expiration Date Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owners Form of Derivati Security Direct (or Indire | Ownership (Instr. 4) | |
| | | | | | Code | V | (A) (D) | Date Exer | cisable | Expiration Date | ¹ Title | Amount or Number of Shares | | | | |
| Repor | ting O | wners | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |

| Daniel Communication (Addison | Relationships | | | | | | | |
|--|--------------------|--|----------------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director 10% Owner | | Officer | Other | | | | |
| Koehler Paul 400 CAPITOL MALL #2060 SACRAMENTO, CA 95814 | | | VP, Commodities & Corp Dev | | | | | |

Signatures

| /s/ Paul Koehler | 04/03/2018 |
|---------------------------------|------------|
| **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) Amount represents shares withheld upon vesting of restricted stock to cover withholding taxes.

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.