FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☑ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

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

1. Name and Address of Reporting Person *					2. Is	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FOSTER RO	NALD (7			ΑD	VA	NCE	D ENER	RGY	INI Y	DUSTE	RIES	5		,			
FOSTER ROHALD C					IN	INC [AEIS]								X Director 10% Owner				
(Last) (First) (Middle)				3. Г	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)						
1595 WYNKOOP STREET, SUITE 800						12/13/2023												
	(Stree	et)			4. It	f Am	endmei	nt, Date On	rigin	al File	d (MM/DI	D/YYY	(Y)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
DENVER, CO 80202													X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)												1 om med by More than One Reporting Person						
			Table l	- Non	-Deri	ivativ	ve Secu	rities Acq	uire	ed, Dis	posed o	f, or l	Ben	eficially Owne	d			
1. Title of Security (Instr. 3) 2. Trans. D					Execu	Deemed ation if any	3. Trans. Co. (Instr. 8)	de	4. Securities Acqui or Disposed of (D) (Instr. 3, 4 and 5)			F	. Amount of Securiti following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)			7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amoui	(A) or	Pri	ce				(I) (Instr. 4)	(Instr. 4)
Common Stock				12/13/2	023			S.(1)		61	8 D	\$10)5			0	D	
Common Stock																18,425 (2)	I	By Self As Trustee
Common Stock															18,425 (3)	I	By Spouse As Trustee	
	Tabl	le II - Der	ivative	Securi	ties I	Bene	ficially	Owned (e	2.g.,	puts, c	calls, wa	rran	ts, o	ptions, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Trans. Date Execution Date, if any			n (In	4. Trans. Cod (Instr. 8)		e 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			and Expiration Date			ities I	Underlying Security	Derivative Security	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)	
				(Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amo Shar	ount or Number of res		Transaction(s) (Instr. 4)		

Explanation of Responses:

- (1) The reported sale was made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 14, 2023.
- (2) Shares held by the Kathryn A. Foster 2020 Spousal Trust, where the reporting person serves as a trustee and is a beneficiary.
- (3) Shares held by the Ronald C. Foster 2021 Trust, where his spouse serves as trustee and is a beneficiary.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FOSTER RONALD C								
1595 WYNKOOP STREET, SUITE 800	X							
DENVER, CO 80202								

Signatures

**Signature of Reporting Person

Date

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

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.