FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average I	hurden								

0.5

hours per response:

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

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* <u>LEHMAN JOHN F</u>																nship of Re applicable Director		g Person(s) to	ssuer Owner		
(Last) (First) (Middle) 450 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 01/08/2015										Officer (given	e title		(specify		
6TH FLOOR					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW YORK NY 10022				-										Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate) (Zip)																		
		Tabl	e I - No	n-Deriv	/ative	Se	ecurit	ies Ac	quired	, Dis	posed o	f, o	r Ben	efici	ally O	vned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) I Of (D) (Instr. 3, 4			d Se Be Ov	Amount of ecurities eneficially wned Following eported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Tra	nsaction(s str. 3 and 4			(Instr. 4)		
Common Stock 01/08/2						2015			A		356(1)		A	\$60	41 4	43,821.9475		D			
Common Stock 01/08/					/2015	2015			A		71(2)		A	\$0.	00 43	43,892.9475(3)		D			
		Та									osed of, onvertib					ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of		Expirati	6. Date Exercisa Expiration Date (Month/Day/Year		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		nstr. 3	8. Price Derivat Securit (Instr. 5	ve deriva / Secul Bene Owne Follov Repo	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares							

Explanation of Responses:

- 1. In lieu of receiving cash fees, the reporting person received 356 stock units, which immediately vested, in the EnerSys Voluntary Deferred Compensation Plan for Non-Employee Directors (the "Plan").
- 2. This amount reflects a matching stock unit contribution by EnerSys for the reporting person's account in the Plan. The matching stock unit contribution vests 25% on each of April 8, 2015, July 8, 2015, October 8, 2015, and January 8, 2016. Such vesting is subject to acceleration or cancellation upon the occurrence of certain events.
- 3. As a result of these transactions the reporting person has an additional 427 stock units in the Plan. Each of these stock units represents a right to receive one share of EnerSys common stock and is payable upon the reporting person's Termination, as defined in the Plan.

Remarks:

Karen J. Yodis, by Power of **Attorney**

01/12/2015

** 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 Number.