FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB A	PPROVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per respon							

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

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* Shaffer David M					2. Issuer Name <b>and</b> Ticker or Trading Symbol EnerSys [ ENS ]									(Check	all app	licable) tor	g Pers	Person(s) to Issuer  10% Owner Other (specify		
(Last) C/O ENE 2366 BEI	(Fii RSYS RNVILLE I	, ,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/16/2014									X	Officer (give title below)  President, EMEA				
(Street) READIN (City)	G PA	. 1	19605 Zip)		4. If	Line) X Form file										Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting on				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Ac	quired,	Dis	posed o	f, o	r Ben	efic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,			3. Transa Code ( 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Secur Benef Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D) Pr		Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock					16/2014				A <sup>(1)</sup>		13,474		A	\$0		73,238.2778			D	
Common Stock 08					5/2014				F <sup>(2)</sup>		12,125	5	D	\$65.43		61,113.2778			D	
Common Stock 05/					/2014				F <sup>(3)</sup>		618		D	\$66.52		60,495.2778			D	
Common Stock 05					)/2014				S <sup>(4)</sup>		0.86		D	\$65.24		60,494.4178		D		
Common Stock 05/					/2014				S <sup>(5)</sup>		0.0349		D	\$65		60,494.3829			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	Code		of Deriv Secu Acqu (A) o Disp of (D (Inst	of		Exercis on Dat Day/Ye		Ame Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		Deri Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	0 F D 0 (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code		v	(A)	(D)	Date Exercisa		Expiration Date	Title	Nu of	mber ares									

## **Explanation of Responses:**

- 1. Represents additional shares acquired upon the vesting of the market share units originally granted to the reporting person on May 16, 2011, having achieved a payout factor of 1.88.
- 2. Shares were forfeited in connection with the vesting of the market share units granted to the reporting person on May 16, 2011
- 3. Shares were forfeited in connection with the vesting of the market share units granted to the reporting person on May 17, 2010.
- 4. This transaction was initiated by the Corporation's third party stock administrator for purposes of settling the fractional share that vested on May 16, 2014.
- 5. This transaction was initiated by the Corporation's third party stock administrator for purposes of settling the fractional share that vested on May 17, 2014.

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

05/20/2014

\*\* Signature of Reporting Person

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.