FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	hours per response:	0.5								

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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		,				inpuriy Act c			_						
1. Name ar	2. Issuer Name <b>and</b> Ticker or Trading Symbol EnerSys [ ENS ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
<u>Chan Caroline</u>														_  >	Direc	ctor		10% Ov	vner	
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023									Office below	er (give title w)		Other (s below)	specify	
C/O ENI	4 If Ar	4. If Amondment, Date of Original Filed (Manth/Day/)									6. Individual or Joint/Group Filing (Check Applicable									
2366 BERNVILLE ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Line)						
,										2	Form filed by One Reporting Person									
(Street)	(Street) READING PA 19605														Form filed by More than One Reporting Person					
l				Rula	1 ر	)h5-	.1 <i>(</i> c)	Tran	car	tion Ind										
Rule 10b5-1(c) Transaction Indication																				
(City) (State) (Zip)					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.															
		Table	l - No	n-Deriva	tive S	ecui	rities	Acc	ηuired,	Dis	posed of	, or	Ben	eficia	lly Owr	ned				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Da			ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 35)		(A) or 3, 4 and	5. Amo Securi Benefi Owned Follow	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount (A) or (D)		A) or D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)				
Common	2023				A		14.8626(	1)	Α	\$0.00	0.00 9,240.378			D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				(e.g., pu	ıs, cai	15, V	vario	ııııs,	Uption	15, 0	,onvertio	16.2	ecui	illes						
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative irities iired ir osed ) r. 3, 4	6. Date Expirati (Month/	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		s (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y   G	LO. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Expira		Expiration Date	Title	or Nun of	ount nber res						

## Explanation of Responses:

1. These shares were granted in the form of Deferred Stock Units ("DSUs"), in connection with the cash dividend paid on June 30, 2023 to stockholders of record as of June 16, 2023 (the "Dividend"), with respect to an aggregate of 9,063 vested DSUs granted to the reporting person on various dates, and adjusted for previously and declared paid cash dividends. These DSUs are vested and payable concurrent with the underlying DSUs.

## Remarks:

Karen J. Yodis, by Power of Attorney

07/05/2023

\*\* Signature of Reporting Person

n 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.