FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL								
	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 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

							. ,				' '								
	d Address of KERRY		2. Issuer Name <b>and</b> Ticker or Trading Symbol EnerSys [ ENS ]									5. Relationship of Reporting Person(s) to Issu (Check all applicable)  Director 10% Own							
																	er (give title		r (specify
(Last)	(Fi		3. Date of Earliest Transaction (Month/Day/Year)									X		below) below)					
, ,	RNVILLE I	05/	05/12/2018										VP, 0	VP, Corporate Controller & PAO					
(Street)					4. If	If Amendment, Date of Original Filed (Month/Day/Year)									i. Indiv .ine)	Individual or Joint/Group Filing (Check Applicable			
READING PA 19605																Form filed by One Reporting Person			
(0)			·-· \													Form filed by More than One Reporting Person			
(City)	(St	ate) (	Zip)																
		Tabl	le I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	posed o	f, o	r Ben	efici	ally	Owne	ed		
Date					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				l and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	е		ted action(s) 3 and 4)		(Instr. 4)
Common Stock 05/12						2018			F <sup>(1)</sup>		112.9676		D	\$73	'3.99 16,		757.8598	D	
Common Stock 05/12						2018			D <sup>(2)</sup>		565		D	\$0	.00 16,		192.8598	D	
Common Stock 05/12/						2018			F <sup>(3)</sup>		58.0916		D	\$73.99		16,134.7682		D	
Common Stock 05/12/2						.018			F <sup>(4)</sup>		118.6324		D	\$73	3.99	16,016.1358		D	
		Та									sed of, onvertib					vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)	action (Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date E Expiratio (Month/II	on Dat	Securities Underlying Derivative Security (Instant 4)  Amo		ount			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

- 1. Shares were for feited in connection with the vesting of restricted stock units granted to the reporting person on May 12, 2014.
- 2. Represents excess shares previously reported in connection with market share units originally granted to the reporting person on May 12, 2015. Upon vesting, the market share units achieved a payout factor of 0.85.
- 3. Shares were forfeited in connection with the vesting of market share units granted to the reporting person on May 12, 2015.
- 4. Shares were forfeited in connection with the vesting of restricted stock units granted to the reporting person on May 12, 2015.

## Remarks:

Karen J. Yodis, by Power of Attorney 05/15/2018

\*\* 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.