FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

OMB Number:	3235-028								
Estimated average burden									
hours per response:	0.								

## 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	Secti	ion 30(l	n) of the i	nvestme	nt Co	mpany Act	of 19	40								
1. Name and Address of Reporting Person*  LEHMAN JOHN F					2. Issuer Name <b>and</b> Ticker or Trading Symbol EnerSys [ ENS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>LETIWAN JOHN F</u>													X Director		ctor	10% Owner		wner			
(Last)	`	,	Middle)				ate of Earliest Transaction (Month/Day/Year)									Offic belov	er (give title w)		Other (specify below)		
450 PAR	K AVENU	E																			
6TH FLOOR				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Ctroot)					-				J		`		,		ine)	_			_		
(Street)  NEW YO	ORK N	<b>V</b> 1	10022												X		n filed by One		•		
, TREW TO	TICK IV		10022		.											Forn Pers	n filed by Mor on	re than C	ne Rep	orting	
(City)	(S	tate) (	Zip)																		
		Tabl	e I - No	n-Deriv	ative	Se	curit	ies Ac	quired	, Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.					4 and S		5. Amount of Securities Beneficially Owned Following Reported		ership Direct Idirect 1. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount		(A) or (D)	Price	. 17	Transa	ction(s) 3 and 4)			(111501.4)	
Common Stock 07/18/3					3/2018	2018					308(1)		A	\$77.9		9 61,452.0159		Γ	)		
Common Stock 07/18/				/2018						62(2)		A	\$0.00		61,514.0159 <sup>(3)</sup>		Γ	)			
		Та									sed of, onvertib				y Ow	ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	n Date,		ansaction de (Instr.		of I		6. Date Exercisable ar Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Ins and 4)		Deriv Secu	. Price of Perivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	n: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	,	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	nount mber ares							

## **Explanation of Responses:**

- 1. In lieu of receiving cash fees, the reporting person received 308 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 October 18, 2018, January 18, 2019, April 18, 2019, and July 18, 2019. 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 370 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** 

07/20/2018

\*\* 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.