FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| IIIEO <i>F</i> | AND EXCHANGE COMMISSIC |
|----------------|------------------------|
| / I- ! 4       | D 0 00540              |

**OMB APPROVAL** 

| -                        |                  |       |  |  |  |  |  |  |  |
|--------------------------|------------------|-------|--|--|--|--|--|--|--|
| ОМВ                      | OMB Number: 3235 |       |  |  |  |  |  |  |  |
| Estimated average burden |                  |       |  |  |  |  |  |  |  |
| hours                    | ner resnonse     | . 0.5 |  |  |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 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

| Name and Address of Reporting Person*     Chan Caroline      |  |          |   | Ene   | 2. Issuer Name and Ticker or Trading Symbol EnerSys [ ENS ]  |   |  |                                       |  |  |                    |   | ck all app   | licable)<br>tor                                | ng Pers  | 10% Ov   | n(s) to Issuer<br>10% Owner                         |            |  |
|--|--|----------|---|---|--|---|--|---------------------------------------|--|--|--------------------|---|--|--|--|--|---|------------|--|
| (Last)   | (Fi  | rst) (M  | /liddle)                                | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2024 |  |   |  |                                       |  |  |                    |   | Office<br>below  | er (give title<br>/)                           |  | Other (s<br>below)   | specify   |            |  |
| C/O ENERSYS<br>2366 BERNVILLE ROAD                           |  |          |   | 4. If /   | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |  |                                       |  |  |                    | 6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person |  |  |  |  |   |            |  |
| (Street) READIN  | IG PA  | PA 19605 |   |   | Ru   | Form filed by More than One Reporting Person  Rule 10b5-1(c) Transaction Indication |  |                                       |  |  |                    |   |  |  | orting   |  |   |            |  |
| (City)   | (St  | ate) (2  | ľip)                                    |   | Check this box to indicate that a transaction was n satisfy the affirmative defense conditions of Rule 1 |   |  |                                       |  |  | ade pur            | rsuant t  |  |  | uction or writt  | en plar  | n that is inter                                     | nded to    |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |          |   |   |  |   |  |                                       |  |  |                    |   |  |  |  |  |   |            |  |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day |  |          |   | Execu<br>ny/Year) if any                                    |  | Deemed<br>cution Date,<br>y<br>nth/Day/Year)  |  | Transaction Disposed (Code (Instr. 5) |  | es Acquired (A)<br>Of (D) (Instr. 3, 4 |                    |   | Securit<br>Benefic<br>Owned  | curities I<br>neficially (<br>ned Following (  |  | : Direct<br>r Indirect<br>str. 4)                                  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |            |  |
|  |  |          |   |   |  |   |  | Code                                  | v  | Amount                                 | mount (A) or (D)   |   | rice   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |  |  |   | (Instr. 4) |  |
| Common   | Stock  |          |   | 08/09/2   | /2024 08/  |   | 8/09/2024  |                                       | A  |  | 2,026(1)           | A   |  | \$0.00   | 13,3   | ,386.7759  |   | D          |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |   |   |  |   |  |                                       |  |  |                    |   |  |  |  |  |   |            |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)          | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any   |          | 4.<br>Transaction<br>Code (Instr.<br>8) |   | of I   |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Insti<br>3 and 4) |  | De<br>Se<br>(Ir    | Price of<br>erivative<br>ecurity<br>estr. 5)  | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | y G  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |            |  |
|  |  |          |   |   | Code   | v   | (A)  | (D)                                   | Date<br>Exercis  | able                                   | Expiration<br>Date | Title   | Amou<br>or<br>Numb<br>of<br>Share  | ber  |  |  |   |            |  |

## **Explanation of Responses:**

1. These shares were granted as Deferred Stock Units (DSUs) and vest upon grant. These DSUs are payable no earlier than six months following termination of service as a director of the Company, at the director's election, with the right of the Company to clawback the value of the DSUs within one year following a termination of service upon the occurrence of certain events.

## Remarks:

Karen J. Yodis, by Power of <u>Attorney</u>

08/13/2024

\*\* 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.