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Check this box if no longer subject to SECURITIES Section 16. SECURITIES									3235-0287 January 31, 2005 werage	
(Print or Typ	e Responses)									
1. Name and Address of Reporting Person <u>*</u> Schmidtlein Michael J			2. Issuer Name and Ticker or Trading Symbol EnerSys [ENS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (I	(Middle) 3. Date of Earliest Transacti					(Check an applicable)			
2366 BERNVILLE ROAD			(Month/Day/Year) 12/24/2015				Director 10% Owner Officer (give title Other (specify below) Sr. VP Finance & CFO			
READIN	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
READING, PA 19605 (City) (State) (Zip) Table L. Non-Derivative Securities Acquired Disposed of or Beneficially Owned										
						_	uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/24/2015		Code V A	Amount 39.5146 (1)	(D) A	Price \$ 0	81,494.4206	D		
Common Stock	12/24/2015		А	29.6831 (2)	А	\$0	81,524.1037	D		
Common Stock	12/24/2015		А	52.0334 (<u>3)</u>	A	\$0	81,576.1371	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
Beno	rtina ()	Iwners	Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Schmidtlein Michael J 2366 BERNVILLE ROAD READING, PA 19605			Sr. VP Finance & CFO					
Signatures								
Karen J. Yodis, by Power of Attorney	12/29/2015							
<u>**</u> Signature of Reporting Person		Date						

Explanation of Responses:

- * 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).

These shares were granted in the form of Market Share Units ("MSUs"), in connection with the cash dividend paid on December 24, 2015 to stockholders of record as of December 11, 2015 (the "Dividend"), with respect to 12,302 unvested MSUs granted to the reporting

(1) to stockholders of record as of December 11, 2013 (the Dividend), with respect to 12,502 unvested MSOs granted to the reporting person on May 31, 2013, and adjusted for previously declared and paid cash dividends. These MSUs will vest and are payable concurrent with the underlying MSUs.

These shares were granted in the form of MSUs, in connection with the Dividend, with respect to 9,319 unvested MSUs granted to the (2) reporting person on May 12, 2014, and adjusted for previously declared and paid cash dividends. These MSUs will vest and are payable concurrent with the underlying MSUs.

These shares were granted in the form of MSUs, in connection with the Dividend, with respect to 16,517 unvested MSUs granted to the (3) reporting person on May 12, 2015, and adjusted for a previously declared and paid cash dividend. These MSUs will vest and are payable concurrent with the underlying MSUs.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.