## Edgar Filing: EnerSys - Form 4

EnerSys												
Form 4	0 2015											
<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Excl						, OWI	NERSHIP OF	OMB 3235-02 Number: January Expires: 20 Estimated average burden hours per response				
obligation may cont <i>See</i> Instru 1(b).	ns Section 17( inue. uction	a) of the I	Public Ut	tility Hold		any .	Act of	1935 or Section	l			
(Print or Type I	(xesponses)											
1. Name and Address of Reporting Person * HOFFEN HOWARD I2. Issuer Symbol EnerSys				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			3. Date of (Month/D 09/25/20	-	ansaction			X Director Officer (give t below)	10%	) Owner r (specify		
				endment, Date Original nth/Day/Year)				<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>				
NEW YOR	K, NY 10036							Form filed by M Person	ore than One Rep	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	) Derivative Se	curiti	es Acq	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)		Date, if	rate, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) /Year) (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	09/25/2015			Code V A	Amount 65.4975 (1)	(A) or (D) A	Price \$ 0	Transaction(s) (Instr. 3 and 4) 19,400.3801 (2)	I	See Footnote 2		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	7. Title Amoun Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Othe			
HOFFEN HOWARD I C/O METALMARK CAPITAL 1177 AVENUE OF THE AMERICAS, 40TH FLOOR NEW YORK, NY 10036								
Signatures								
Karen J. Yodis, by Power of Attorney	09/29/2015							

Date

\*\*Signature of Reporting Person

Si

## **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 Deferred Stock Units ("DSUs"), in connection with the cash dividend paid on September 25, 2015 to stockholders of record as of September 11, 2015 (the "Dividend"), with respect to an aggregate of 19,018 vested DSUs granted to (1) the reporting person on various dates, and adjusted for previously declared and paid cash dividends. These DSUs are vested and payable concurrent with the underlying DSUs.

The reporting person has no direct pecuniary interest in such shares and disclaims beneficial ownership therein except to the extent (2) ultimately realized.

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.