## Edgar Filing: Ghasemi Seifi - Form 4

Ghasemi Seif	fi											
Form 4												
August 17, 20	011											
FORM	$ 4 _{\text{UNITED S}}$	татр	SECUD	TTIES		ID EVC	TT A N	JCE	COMMERION	,	PPROVAL	
	UNITED S	IAIES						NGE (	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer STATEMENT OF CHANG				hington, D.C. 20549 GES IN BENEFICIAL OWNERSHIP OF						Expires:	January 31, 2005	
Section 16.					SECURITIES					Estimated average burden hours per		
Form 4 or Form 5			Castion 14	(a) a <b>f</b>	4 <b>1</b>	C		<b>1</b>	A -+ -f 1024	response	0.5	
obligation may conti <i>See</i> Instru 1(b).	<sup>1s</sup> Section 17(a	) of the		ility Ho	oldi	ng Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	Responses)											
1. Name and Address of Reporting Person *2. Issuer 1Ghasemi SeifiSymbolEnerSys				er Name <b>and</b> Ticker or Trading s [ENS]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	rst) (Middle) 3. Date of Earliest Transaction				(Check all applicable)						
C/O ENERS ROAD	SYS, 2366 BERNY	VILLE	(Month/Da 08/15/20	ay/Year)					X_ Director Officer (give below)		6 Owner er (specify	
	(Street)		4. If Amer	ndment.	Date	e Original			6. Individual or Jo	oint/Group Fili	ng(Check	
				ed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
READING,	PA 19605								Person	Aore than One R	eporting	
(City)	(State) (2	Zip)	Table	e I - Non	1-De	rivative S	ecurit	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	emed on Date, if /Day/Year)	Code (Instr.	8)	4. Securit nAcquired Disposed (Instr. 3, -	(A) o of (D	)	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 (1)	08/15/2011			А		4,454	А	\$0	18,215	D		

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
I B	Director	10% Owner	Officer	Other					
Ghasemi Seifi C/O ENERSYS 2366 BERNVILLE ROAD READING, PA 19605	Х								
Signatures									
Karen J. Yodis, by Power of Attorney	08/17/2011								
**Signature of Reporting Person		Date							
Explanation of Dechanges									

## **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 as deferred stock units and vest upon grant. These deferred stock units are payable six months following a
   (1) termination of service as a director of the Company, with the right of the Company to clawback the value of the deferred stock unit within one year following a termination of service upon the occurrence of certain events.

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.