

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>deZwaan Michiel</u> (Last) (First) (Middle) <u>C/O 70 SIR JOHN ROGERSON'S QUAY</u> (Street) <u>DUBLIN L2 2</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>STERIS plc [STE]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>V.P., Human Resources & CHRO</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>03/28/2019</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year) <u>03/28/2019</u>	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Ordinary Shares	03/28/2019		A		30 ⁽¹⁾	A	(2)	30	I	See Footnote Below. ⁽³⁾

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)					

Explanation of Responses:

- The Reporting Person failed to report ordinary share equivalents held in the STERIS Corporation 401k Plan. A corresponding failure to report was made in the Reporting Person's Form 4 filing made March 28, 2019 with respect to Old STERIS (as hereinafter defined).
- Represents ordinary shares of STERIS plc, a public limited company organized under the laws of Ireland ("STERIS"), received by the Reporting Person pursuant to a court-approved scheme of arrangement under English law (the "Scheme"). In connection with the Scheme, the Reporting Person received shares of STERIS in an amount equal to the number of the Reporting Person's cancelled shares of STERIS plc, a public limited company organized under the laws of England and Wales ("Old STERIS"). The Reporting Person's STERIS shares are subject to terms and conditions, including restrictions, substantially identical to those that were applicable to the Old STERIS shares, except as otherwise required by law. Following the completion of the Scheme, STERIS became the ultimate holding company of Old STERIS.
- Represents 30 ordinary share equivalents held on behalf of the Reporting Person under the STERIS Corporation 401(k) Plan as of March 28, 2019.

Remarks:

/s/ Ronald E. Snyder,
Authorized Representative 06/27/2019
under Power of Attorney

** 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.