FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average I	burden

0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

	2. Issuer Name and Ticker or Trading Symbol STERIS plc [STE]		tionship of Reporting Person(s) to Issuer all applicable)			
		1	Director	10% Owner		
	3. Date of Earliest Transaction (Month/Day/Year)		Officer (give title below)	Other (specify below)		

1. Name and Address of Reporting Person* Sohi Mohsen				2. Issuer Name and Ticker or Trading Symbol STERIS plc [STE]							(CI	Relationship neck all appli	,		on(s) to Issu		
(Last) 70 SIR J	(Last) (First) (Middle) 70 SIR JOHN ROGERSON'S QUAY					3. Date of Earliest Transaction (Month/Day/Year) 08/08/2024							Officer (give title Other (specify below)				
(Street) DUBLIN 2 L2 D02 R296 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 08/12/2024 tive Securities Acquired, Disposed of, or Benefic						Lin	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ansaction	2A. Deemed Execution Date,		3. 4. Securitie Transaction Disposed (Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) o (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
		Т	able II - Deri (e.g.					uired, Di s, option					y Owned				
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	Code	5. Number of ode (Instr. Derivative		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 derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisabl		expiration late	Title	Amount or Number of Shares					
Career Restricted Stock Units	(1)	08/08/2024		A		782 ⁽²⁾		(3)		(3)	Ordinary Shares	782	\$0	6,055 ⁽²	2)	D	
Career Restricted Stock Units	(1)	08/08/2024		A		417 ⁽²⁾		(3)		(3)	Ordinary Shares	417	\$239.68 ⁽⁴⁾	6,472 ⁽²	2)	D	

Explanation of Responses:

- 1. Each Career Restricted Stock Unit represents the right to receive one STERIS ordinary share six months after the cessation of the Director's Board service.
- 2. This Form 4 Amendment is being filed to correct the amount of Career Restricted Stock Units previously reported.
- 3. These Career Restricted Stock Units are fully vested immediately. They will be settled in STERIS ordinary shares six months after the cessation of the Director's Board service.
- 4. These Career Restricted Stock Units were issued to the Reporting Person in lieu of fees of \$100,000.

Remarks:

/s/ John P. Ubbing, Authorized Representative under Power of 10/02/2024 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.