

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
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1. Name and Address of Reporting Person* <u>Chapman Timothy L</u> (Last) (First) (Middle) 5960 HEISLEY ROAD (Street) MENTOR OH 44060 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>STERIS CORP [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>SR VP & Grp. Pres., Healthcare</u>
	3. Date of Earliest Transaction (Month/Day/Year) 05/20/2014	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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			
Common Shares, No Par Value	05/20/2014		F		1,472 ⁽¹⁾	D	\$52.66	20,109 ⁽²⁾	D	
Common Shares, No Par Value								13,469	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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
						Date Exercisable	Expiration Date					

Explanation of Responses:

- 1,472 shares were withheld from the 4,500 restricted shares that vested on May 20, 2014. These 1,472 shares represent the value of the taxes required to be withheld pursuant to applicable employment or tax laws, as determined by the Issuer. These 4,500 shares were awarded to Mr. Chapman on May 20, 2010. These vested shares were valued at the NYSE closing market price on May 20, 2014.
- 14,700 of these Common Shares are restricted. The restrictions on these Common Shares lapse as follows: 3,700 on June 1, 2015; 5,000 on May 31, 2016 and 6,000 on May 31, 2017.
- These shares are held in The Sharon A. Chapman 2007 Amended & Restated Revocable Trust UAD 7/20/2007 for the benefit of the Reporting Person's spouse. The Reporting Person and the Reporting Person's spouse are co-trustees of the trust. The Reporting Person disclaims beneficial ownership of these securities, except to the extent of his pecuniary interest therein.

/s/ Dennis P. Patton,
Authorized Representative 05/22/2014
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.