FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington,     | DC   | 20549 |  |
|-----------------|------|-------|--|
| vvasiliilgitii, | D.C. | 20343 |  |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |  |
| hours nor resnance       | . 05      |  |  |  |  |  |  |  |  |  |

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

| 1. Name and Address of Reporting Person*  Martin Paul Edward                              |                                                                                                                                               |            |         |         | 2. Issuer Name and Ticker or Trading Symbol STERIS plc [ STE ] |                                                                                                                                                                                                                  |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   | ationship<br>all appli<br>Directo | icable)                                                                                                              | g Per          | son(s) to Iss<br>10% Ow                                                  |                                                       |        |
|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|---------|---------|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------|---------------------------------------|--|-----------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------|-------------------------------------------------------|--------|
| (Last)                                                                                    | (Fi                                                                                                                                           | rst) (     | Middle) |         |                                                                | 3. Date of Earliest Transaction (Month/Day/Year) 08/03/2023                                                                                                                                                      |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   |                                   | Officer<br>below)                                                                                                    | (give title    |                                                                          | Other (s<br>below)                                    | pecify |
| C/O 70 SIR JOHN ROGERSON'S QUAY                                                           |                                                                                                                                               |            |         | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |                                                                                                                                                                                                                  |       |                                                                |                                       |  |                                                                                                     |                                    | 6. Individual or Joint/Group Filing (Check Applicable Line)                       |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
| (Street) DUBLIN L2 2                                                                      |                                                                                                                                               |            |         |         |                                                                |                                                                                                                                                                                                                  |       |                                                                |                                       |  |                                                                                                     |                                    | X Form filed by One Reporting Person Form filed by More than One Reporting Person |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
| (City) (State) (Zip)                                                                      |                                                                                                                                               |            |         |         | Rul                                                            | Rule 10b5-1(c) Transaction Indication                                                                                                                                                                            |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
|                                                                                           |                                                                                                                                               |            |         |         |                                                                | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
|                                                                                           | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned                                                              |            |         |         |                                                                |                                                                                                                                                                                                                  |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Date                             |                                                                                                                                               |            |         |         | Execution Date,                                                |                                                                                                                                                                                                                  |       | Code (Ins                                                      | Transaction Disposed (Code (Instr. 5) |  |                                                                                                     |                                    | and Securiti<br>Benefic                                                           |                                   | es<br>ially<br>Following                                                                                             | Form<br>(D) or | n: Direct<br>r Indirect<br>str. 4)                                       | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |        |
|                                                                                           |                                                                                                                                               |            | Cor     |         |                                                                | Code                                                                                                                                                                                                             | v     | Amount (A) or (D)                                              |                                       |  |                                                                                                     | Transaction(s)<br>(Instr. 3 and 4) |                                                                                   |                                   |                                                                                                                      | 111501. 4)     |                                                                          |                                                       |        |
|                                                                                           | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities) |            |         |         |                                                                |                                                                                                                                                                                                                  |       |                                                                |                                       |  |                                                                                                     |                                    |                                                                                   |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
| Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any |                                                                                                                                               |            |         |         | ransaction of E<br>Code (Instr. Derivative (                   |                                                                                                                                                                                                                  |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                       |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |                                    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                               |                                   | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | у              | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)                 |        |
|                                                                                           |                                                                                                                                               |            |         |         | Code                                                           | v                                                                                                                                                                                                                | (A)   | (D)                                                            | Date<br>Exercisable                   |  | piration<br>te                                                                                      | Title                              | Amount<br>or<br>Number<br>of<br>Shares                                            |                                   |                                                                                                                      |                |                                                                          |                                                       |        |
| Career<br>Restricted<br>Stock<br>Units                                                    | (1)                                                                                                                                           | 08/03/2023 |         |         | A                                                              |                                                                                                                                                                                                                  | 1,050 |                                                                | (2)                                   |  | (2)                                                                                                 | Ordinary<br>Shares                 | 1,050                                                                             |                                   | \$0.00                                                                                                               | 3,581          |                                                                          | 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. 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.

## Remarks:

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

\*\* Signature of Reporting Person

08/07/2023

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.