#### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours par raspansa:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Sohi Mohsen				2. Issuer Name <b>and</b> Ticker or Trading Symbol STERIS plc [ STE ]									(Cr	eck all app	icable) or	ng Per	son(s) to Iss 10% Ov	vner	
(Last) (First) (Middle) C/O RUTHERFORD HOUSE, STEPHENSONS WAY					3. Date of Earliest Transaction (Month/Day/Year) 08/09/2018										r (give title )		Other (: below)	specify	
CHADD	ESDEN				4. If	f Ame	ndment,	Date	of Origina	al File	d (Month/D	ay/Yea	ar)	6. I		Joint/Group	o Filin	g (Check Ap	plicable
(Street) DERBY	X	0	DE21 6L	Y										X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - No	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed o	of, or	Ben	eficial	ly Owne	d			
				2. Transa Date (Month/D	Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	()	(A) or (D) Prio		Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Ordinary	Shares, 10	pence par value		08/09	/2018	2018		A		762	2 A		\$0.00	) 22	22,455		D		
Ordinary Shares, 10 pence par value 08/0				08/09	/2018	2018		F		94 <sup>(1)</sup> D \$1		\$114.7	74 22	22,361		D			
		Т	able II -								osed of converti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executio		4. Transaction Code (Instr. B)		n of		6. Date Exercis Expiration Date (Month/Day/Yea		е	7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	C	Amount or Number of Shares					
Director Stock Option (right to buy)	\$114.74	08/09/2018			A		4,893		(2)		08/09/2028	Ordir Shai		4,893	\$0.00	4,893		D	
Career Restricted Stock	(3)	08/09/2018			A		457		(4)		(4)	Ordir Shar		457	\$0.00	688		D	

#### **Explanation of Responses:**

- $1. \ Represents the number of ordinary shares withheld to satisfy taxes.\\$
- 2. These nonqualified stock options are fully vested and are exercisable immediately.
- 3. 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.
- 4. 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

08/10/2018

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.

- $^{\star}$  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.