FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

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

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      STROUD ANDREW B JR |                                                                                                                                              |                  |             |                                                          | 2. Issuer Name and Ticker or Trading Symbol Energy Recovery, Inc. [ ERII ] |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)  Director 10% Owner |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------|----------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------|--------------------------------------------------|--------------------|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--|
| (Last)                                                       | (First)                                                                                                                                      | · ·              | ddle)       |                                                          |                                                                            | 3. Date of Earliest Transaction (Month/Day/Year) 03/11/2015 |                                                                                                          |       |                                                                |                                                  |                    |                                                                          | X                                                                                        | Officer (g<br>below)                 |                                                                                                | Other (specify below)                                                                                |                                                                   |                                                                          |                                                                    |  |
| C/O ENERGY RECOVERY, INC.                                    |                                                                                                                                              |                  |             |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      | VP, Human Resources                                                                            |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
| 1717 DOOLITTLE DRIVE                                         |                                                                                                                                              |                  |             | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    | 6. Indiv                                                                 | 6. Individual or Joint/Group Filing (Check Applicable Line)                              |                                      |                                                                                                |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
|                                                              |                                                                                                                                              |                  |             |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          | X                                                                                        | X Form filed by One Reporting Person |                                                                                                |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
| (Street) SAN LEANDR                                          | O CA                                                                                                                                         | 0.4              | 577         |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      | Form file                                                                                      | d by More                                                                                            | than O                                                            | ne Reportin                                                              | g Person                                                           |  |
| SAN LEANDR                                                   | to CA                                                                                                                                        | 94               | 311         |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      |                                                                                                |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
| (City)                                                       | (State)                                                                                                                                      | (Zi <sub>l</sub> | o)          |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      |                                                                                                |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
|                                                              |                                                                                                                                              | Та               | ble I - Nor | า-Deri                                                   | vativ                                                                      | e Se                                                        | curitie                                                                                                  | s Acq | uired, l                                                       | Disp                                             | osed of,           | or l                                                                     | Benefi                                                                                   | cially Ow                            | ned                                                                                            |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
| Date                                                         |                                                                                                                                              |                  |             | th/Day/Year) if                                          |                                                                            | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                                                                                                          |       |                                                                | ties Acquired (A) or<br>I Of (D) (Instr. 3, 4 an |                    |                                                                          | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reported<br>Transaction(s) |                                      | 6. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4)                              |                                                                                                      | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                                                          |                                                                    |  |
|                                                              |                                                                                                                                              |                  |             |                                                          |                                                                            |                                                             |                                                                                                          | Code  | v                                                              | Amount                                           |                    | (A) or<br>(D)                                                            | Price                                                                                    | (Instr. 3 and 4)                     |                                                                                                |                                                                                                      |                                                                   | (111501.4)                                                               |                                                                    |  |
| Common Stock 03/1                                            |                                                                                                                                              |                  |             |                                                          | 1/201                                                                      | 5                                                           |                                                                                                          |       | P 1,700 A                                                      |                                                  | \$2.828(1)         | 1,7                                                                      | 1,700                                                                                    |                                      | D                                                                                              |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
|                                                              | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                  |             |                                                          |                                                                            |                                                             |                                                                                                          |       |                                                                |                                                  |                    |                                                                          |                                                                                          |                                      |                                                                                                |                                                                                                      |                                                                   |                                                                          |                                                                    |  |
| 1. Title of<br>Derivative<br>Security (Instr. 3)             | Conversion Date Execution Date, or Exercise (Month/Day/Year) if any                                                                          |                  |             | ate, T                                                   | 4.<br>Transaction<br>Code (Instr.<br>8)                                    |                                                             | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                                  | te                 | 7. Title and Am<br>Securities Und<br>Derivative Secu<br>(Instr. 3 and 4) |                                                                                          | derlying<br>curity                   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                                            | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transaction | s<br>Illy                                                         | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|                                                              |                                                                                                                                              |                  |             | C                                                        | Code                                                                       | v                                                           | (A)                                                                                                      | (D)   | Date<br>Exercisa                                               |                                                  | Expiration<br>Date | Title                                                                    |                                                                                          | Amount<br>or<br>Number<br>of Shares  |                                                                                                | (Instr. 4)                                                                                           | 1011(5)                                                           |                                                                          |                                                                    |  |

## **Explanation of Responses:**

1. This figure is the weighted average purchase price of multiple trades. The reporting person undertakes to provide to the SEC staff, ERI, or a shareholder of ERI, full information about the number of shares purchased at each separate price, upon request.

/s/ Lemyrtle Thompson, Attorneyin-fact for Andrew B. Stroud, Jr. 03/12/2015

\*\* 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.