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

| 1. Name and Address of Reporting Person* <u>Trempont Dominique</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Energy Recovery, Inc. [ERII] | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|-----------------------|---|---------|--|---|--|-----|--|---------------------------------------|--------------------|--|----------|-------------------------------------|---|--|--------|--|---|--|
| (Last) | (First) | , | (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/23/2015 | | | | | | | | | ve title | | Other (s below) | specify | |
| C/O ENERGY RECOVERY, INC. 1717 DOOLITTLE DRIVE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | , , , | | | | | | |
| (Street) SAN LEAND | RO CA | 9 | 4577 | | | | | | | | | | | | Form filed | by More | than C | ne Reportin | g Person | |
| (City) | (State |) (2 | Zip) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Date | | | | | nsaction th/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Code (Instr. 8) | | Disposed | Securities Acquired (A) or sposed Of (D) (Instr. 3, 4 a | | | 5. Amount of Securities Beneficially Following F Transaction (Instr. 3 and | y Owned Reported (Instruction) | | lirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Amount | | D) | Price | | | | | | |
| | 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 | cise (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Yea | Co | Transaction Code (Instr | | 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) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | ļ, | Amount or Number of Shares | | (Instr. 4) | on(s) | | | |
| Stock Option (Right to Buy) | \$2.92 | 06/23/2015 | | \perp | A | | 53,392 | | (1) | 0 | 06/23/2025 | Comn Stoc | | 53,392 | \$0 | 215,08 | 34 | D | | |

Explanation of Responses:

1. The Shares will fully vest on the 2016 Shareholder Meeting date, anticipated to be June 17, 2016.

/s/ Lemyrtle E. Thompson,

Attorney-in-Fact for Dominique 06/25/2015

Trempont

** 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.