

Bensalah Nocair  
Form 3  
March 14, 2012

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

|                                                   |         |                                      |                                                                            |                                                                        |
|---------------------------------------------------|---------|--------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------|
| 1. Name and Address of Reporting Person *         |         | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol                                |                                                                        |
| Â Bensalah Nocair                                 |         | (Month/Day/Year)                     | Energy Recovery, Inc. [ERII]                                               |                                                                        |
| (Last)                                            | (First) | (Middle)                             | 03/06/2012                                                                 |                                                                        |
| C/O ENERGY RECOVERY, INC., Â 1717 DOOLITTLE DRIVE |         |                                      | 4. Relationship of Reporting Person(s) to Issuer                           | 5. If Amendment, Date Original Filed(Month/Day/Year)                   |
| (Street)                                          |         |                                      | (Check all applicable)                                                     |                                                                        |
| SAN LEANDRO, Â CA Â 94577                         |         |                                      | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner       | 6. Individual or Joint/Group Filing(Check Applicable Line)             |
| (City)                                            | (State) | (Zip)                                | <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Form filed by One Reporting Person |
|                                                   |         |                                      | (give title below) (specify below)                                         | <input type="checkbox"/> Form filed by More than One Reporting Person  |
|                                                   |         |                                      | VP of Manufacturing                                                        |                                                                        |

**Table I - Non-Derivative Securities Beneficially Owned**

|                                    |                                                          |                                                                   |                                                          |
|------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|
| 1. Title of Security<br>(Instr. 4) | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

|                                               |                                                             |                                                                                |                                                        |                                                      |                                                          |
|-----------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------|
| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|                                               | Date Exercisable                                            | Expiration Date                                                                | Title                                                  | Amount or Number of                                  |                                                          |

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|                                         |       |            |                 | Shares |         | or Indirect<br>(I)<br>(Instr. 5) |   |
|-----------------------------------------|-------|------------|-----------------|--------|---------|----------------------------------|---|
| Employee Stock Option<br>(Right to Buy) | Â (1) | 01/04/2022 | Common<br>Stock | 39,695 | \$ 2.59 | D                                | Â |
| Employee Stock Option<br>(Right to Buy) | Â (2) | 02/15/2022 | Common<br>Stock | 33,186 | \$ 2.46 | D                                | Â |

## Reporting Owners

| Reporting Owner Name / Address                                                                | Relationships |           |                       |       |
|-----------------------------------------------------------------------------------------------|---------------|-----------|-----------------------|-------|
|                                                                                               | Director      | 10% Owner | Officer               | Other |
| Bensalah Nocair<br>C/O ENERGY RECOVERY, INC.<br>1717 DOOLITTLE DRIVE<br>SAN LEANDRO, CA 94577 | Â             | Â         | Â VP of Manufacturing | Â     |

## Signatures

/s/ Denise Winn, attorney-in-fact for Nocair  
Bensalah

03/14/2012

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, *see* Instruction 5(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).

(1) 25% one year cliff vest on 1st anniversary of vest start date of January 1, 2012; 1/48th monthly thereafter

vests 1/36th monthly beginning in the month following the 1st anniversary of the vesting start date of February 16, 2012. The option also

(2) includes 11,062 shares not listed in this table that will vest on the first anniversary of the grant date only if the company meets an internal budget performance goal; that performance vesting will be reported on Form 4 if it occurs.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.