FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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	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

							- 3 - ()	- 3.10			1 )										
1. Name and Address of Reporting Person*							2. Issuer Name <b>and</b> Ticker or Trading Symbol COMMVAULT SYSTEMS INC [ CVLT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BUNTE AL																Direc	ctor	10%	Owner		
,															X	Offic	er (give title	Other	(specify		
(Last)	(Fi	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year)									Λ	belov	N)	below	)		
1 COMMVAULT WAY						05/16/2018									Executive Vice President & COO						
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
TINTON																Line)					
<b>FALLS</b>	NJ	(	)7724	724												X Form filed by One Reporting Person					
					_													re than One Re	oorting		
(City)	/C+	State) (Zip)														Pers	on				
(City)	(31	ale) (	Zip)																		
		Tabl	e I - No	n-Deriv	vative	Se	curitie	es Aco	quired,	Dis	posed o	of, o	r Ben	efici	ally (	Owne	ed				
1. Title of S	Security (Inst	r. 3)		2. Trans	saction					3. 4. Securities Acquired (A)						5. Amo		6. Ownership	7. Nature		
				Date (Month/	/Day/Yea		Execution if any	ecution Date,		Transaction Dispo		ed Of (D) (Instr. 3, 4			and Securit			Form: Direct (D) or Indirect	of Indirect Beneficial		
				(	(onazuyi roury		(Month/Day/Year)					-,			Owne		Following	(I) (Instr. 4)	Ownership		
									Code	V	Amount		(A) or		Report Transa		ction(s)		(Instr. 4)		
						Code	Ľ	Amount		(D)	Price	(	(Instr. 3 and 4)								
Common Stock <sup>(1)</sup> 05/16/							05/16	05/16/2018			9,801	L	A	(2)		508,364.4724		D			
		Ta	hle II - I	Deriva	tive S	eci	ırities	Δcau	ired D	ienc	sed of,	or F	Renef	iciall	v Ov	ned		,	•		
		10									onvertib				y Ou	viica					
1. Title of	2.	3. Transaction	3A. Deem		4.		on of E		6. Date Exercisable an			7. Title and			8. Price of		9. Number o		11. Nature		
Derivative Security	Conversion or Exercise Price of	Date (Month/Day/Year)	Execution if any	n Date,	Transa Code (				Expiration (Month/E			Amount of Securities			Derivative Security		derivative Securities	Ownership Form:	of Indirect Beneficial		
(Instr. 3)			(Month/Da	ay/Year)	8)	•			`	(,					(Instr. 5)		Beneficially Owned	Direct (D) or Indirect	Ownership (Instr. 4)		
	Derivative Security													ıstr. 3			Following	(I) (Instr. 4)	(111511. 4)		
								Disposed of (D)					l 4)				Reported Transaction	(e)			
						of (D) (Instr. 3, 4										(Instr. 4)	(5)				
						and 5)								4							
														ount				- 1			
												or Nu	mber								
				Code	l,	(A)	(D)	Date Exercisa		Expiration Date	Title	of e Sha	ares								
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## **Explanation of Responses:**

1. The common stock is being granted as restricted stock units and is subject to a 3-year vesting schedule, as follows: 1/3 on the first anniversary of the grant with the remaining portion vesting in equal quarterly installments thereafter.

2. Not applicable.

## Remarks:

Warren H. Mondschein, Attorney-in-Fact 05/22/2018

\*\* 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.