FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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* Merrill Gary					2. Issuer Name and Ticker or Trading Symbol COMMVAULT SYSTEMS INC [CVLT]							all applicable) Director	ng Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 1 COMMVAULT WAY						ate of Earliest Trans 6/2024	action (Month	n/Day/Year)		Officer (give title below) Chief Commercial Officer				
(Street) TINTON FALLS	ON NI 07724							6. Indiv Line)	<u>·</u>						
(City)	(Sta		Zip)												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			ion	2A. Deemed	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		d (A) or	5. Amount of		- N-4			
				Date (Month/Day	/Year)	Execution Date, if any (Month/Day/Year)	Code ((D) (Insti	. 3, 4 and	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					/Year)	if any	Code ((A) or (D)	Price	Securities Beneficially	Form: Direct (D) or Indirect	of Indirect Beneficial	
Common	Stock ⁽¹⁾					if any	Code (I 8)	Instr.	5)	(A) or	<i>,</i>	Securities Beneficially Owned Following Reported Transaction(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership	
Common				(Month/Day	024	if any	Code (I 8)	Instr.	Amount	(A) or (D)	Price	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
		Ta	ble II -	08/16/20 08/19/20	024 024 ve Se	if any	Code (8) Code S S ired, I	v V	Amount 1,509 946 osed of, c	(A) or (D) D D or Bend	Price \$148.1 \$150.12 eficially (Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 112,864 111,918	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)			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) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares automatically sold solely to satisfy tax withholding obligations of reporting person on vesting of restricted stock. Proceeds from the sale were submitted to the Internal Revenue Service.

Remarks:

/s/ Danielle Abrahamsen, Attorney-in-Fact ** Signature of Reporting Person

08/20/2024

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.