FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPR	ROVAL
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ı	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).

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*						2. Issuer Name and Ticker or Trading Symbol Quanterix Corp [QTRX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
HRUSOVSKY E KEVIN						Zamirani Qork [Array]								X	Directo	tor		10% Ow	ner	
(Last)	(F	irst)	(Middle)		3. 1	Date of Earliest Transaction (Month/Day/Year)								X		Officer (give title below)		Other (specify below)		
C/O QUANTERIX CORPORATION,							02/18/2020								Cha	Chairman, Preside		nt & CEO		
900 MIDDLESEX TURNPIKE																				
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					_		onament, t	Date o	n Originai i	iicu	(IVIOTILI II De	zyr reary		Line)	iiviaaai oi e	oma Oroup	· · ··································	, (Oncorrip)	Siloabic	
BILLER	ICA M	ΙA	01821											X	Form f	Form filed by One Reporting Person				
				_										Form filed by More than One Reporting Person						
(City) (State) (Zip)															Persor					
		Tah	ole I - No	n Dori	vativ	۰ ۶۰	ouritio	. ^ ^	nuirod F)ici	ancod o	or D	nofic	ially	Owned					
			JIE I - NOI			_				ادار										
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acqui I Of (D) (In		and Securitie Benefici Owned F		es Form ially (D) (Following (I) (I		m: Direct or Indirect	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pr	Price Repo		ed ction(s) and 4)			(Instr. 4)	
Common Stock 02/18					8/202	2020		A		38,997	8,997 ⁽¹⁾ A \$		0.00	1,154,930(2)			D			
			Table II -	Deriva	ative	Sec	urities	Acaı	uired. Di	spo	sed of.	or Ber	eficia	ally (Owned					
									, options											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)			of Securities			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)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		expiration	or Ni of		unt ber es						
Stock Option (right to buy)	\$27.76	02/18/2020			A		90,992		(3)	0	2/18/2030	Commor Stock	90,9	92	\$0.00	90,992	2	D		

Explanation of Responses:

- 1. Represents shares of stock issuable on vesting of restricted stock units. The restricted stock units vest as to 25% of the shares on February 18, 2021 and vest as to an additional 2.083% of the shares per month
- 2. Includes 213,747 restricted stock units and 39,815 shares of common stock that are subject to performance based vesting.
- 3. The option vests as to 25% of the shares on February 18, 2021 and vests as to an additional 2.083% of the shares per month for 36 months thereafter.

Remarks:

/s/ Brian Keane, as Attorney-in-02/20/2020 **Fact**

** 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.