FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * MacPherson Regan J				2. Issuer Name and Ticker or Trading Symbol QUANTUM CORP /DE/ [QMCO]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) C/O QUANTUM CORPORATION, 224 AIRPORT PARKWAY, SUITE 550					3. Date of Earliest Transaction (Month/Day/Year) 12/23/2020								X Officer (give title below) Other (specify below) Chief Legal&Compliance Officer					
(Street) SAN JOSE, CA 95110				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)				3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially O Reported Tran		lly Owned I Transaction	Following	6. Ownership Form:	Beneficial		
					(Month/Day/Year)		Co	ode	V	Amount	(A) or (D)	Price		(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 1		12/23/2020			S	S		8,992 (1)	D	\$ 6.365 (2)	57	53,831 (3)			D			
	Tepon on a	oparate inte	for each class of secu Table II -	Deriva	tive Sec	curit	ies Ac	equire	Person the	sons whatained in form dis	no respond this splays	form a a cur Benefic	are ren	not requ tly valid		ormation spond unle rol numbe	ss	1474 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day	on 3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. A U Se (I	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownersh (Instr. 4)	
					Code	V	(A)	(D)	Dat Exe	-	Expira Date	tion T	itle	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
MacPherson Regan J C/O QUANTUM CORPORATION 224 AIRPORT PARKWAY, SUITE 550 SAN JOSE, CA 95110			Chief Legal&Compliance Officer					

Signatures

/s/ Regan MacPherson	12/23/2020
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Represents the number of shares automatically sold, on a non-discretionary basis, to cover tax withholding obligations in connection with the vesting of performance stock units granted on November 1, 2019 and restricted stock units granted on November 1, 2019.
- (2) This is the price of the shares sold, \$6.3657 per share. Upon request by the Commission staff, Quantum Corporation, or a security holder of the Quantum Corporation, the Reporting Person will provide full information regarding the number of shares sold at this price as set forth in this Form 4.
- (3) Includes 323 shares acquired under Quantum Corporation's Employee Stock Purchase Plan on August 5, 2020.

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.