FORM 4	4
--------	---

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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

SEC 1474 (9-02)

#### 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 Type Respon	ses)		r								
1. Name and Address DODSON J MIC	2. Issuer Name <b>a</b> QUANTUM C			0,	nbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) C/O QUANTUM AIRPORT PARK	3. Date of Earliest Transaction (Month/Day/Year) 08/31/2020						X         Officer (give title below)           Other (specify below)           Senior Vice President, CFO				
SAN JOSE, CA 9	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								
(Instr. 3) Date (Month/Day/Year) a		Execution Date, if		ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4)		
				Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)	(Instr. 4)
Common Stock		08/31/2020		S		13,132 (1)	D	\$ 5.5784	573,154	D	

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Number		and Expirati	piration Date Amount of		unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year) U		Underlying Security		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative		Secu		Securities (Instr. 5)		Beneficially	Derivative	Ownership
	Derivative					Securities		(Instr. 3 and			Owned	Security:	(Instr. 4)		
	Security					Acquired			4)			Following	Direct (D)		
					(A) or							Reported	or Indirect		
					Disposed							Transaction(s)	(I)		
					of (D)							(Instr. 4)	(Instr. 4)		
						(Instr. 3,									
						4, and 5)									
											Amount				
								D (	<b>.</b>		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
DODSON J MICHAEL C/O QUANTUM CORPORATION 224 AIRPORT PARKWAY, SUITE 550 SAN JOSE, CA 95110			Senior Vice President, CFO					

### **Signatures**

 /s/ Josie Buensuceso, Attorney-in-Fact for J. Michael Dodson
 09/02/2020

 <sup>\*\*</sup>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 restricted stock units granted on June 1, 2018.

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.