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

| | pe Response | | | | | | | | | | | | | | |
|--|---------------|--|--|---|--|----------------------------------|---|--|--|-------------------------------|---|---|--|--|--|
| Name and Address of Reporting Person * Jacoby Rebecca | | | 2. Issuer Name and Ticker or Trading Symbol QUANTUM CORP /DE/ [QMCO] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner | | | | | | |
| (Last) (First) (Middle) C/O QUANTUM CORPORATION, 224 AIRPORT PARKWAY, SUITE 550 | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2022 | | | | | | Office | er (give title belo | ow) | Other (specify | pelow) | | |
| (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 PersonForm filed by More than One Reporting Person | | | | | | | |
| (City | | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ow | | | | | Owned | | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) Common Stock 09/01/2022 | | 1 | Date | 2A. Deemed Execution Date, any (Month/Day/Ye | if (| 3. Transac Code (Instr. 8) | (A) | 4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | Beneficia Reported | ant of Securities ally Owned Following d Transaction(s) | | Form: | 7. Nature of Indirect Beneficial |
| | | | | | ar) | Code | V Am | ount | (A) or (D) | Price | (Instr. 3 and 4) | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
| | | | | A | 79, | 518 | A | \$ 0 | 158,624 | | J | D | | | |
| | | separate line for | each class of secur | ities beneficially | own | I | Persons containe | who i | his for | m are | not requ | ction of inf | spond unl | ess | 1474 (9-02) |
| | | separate line for | Table II - I | Derivative Secur | ities | Acquire | Persons containe the form d, Dispose | who id in the display | his for ays a c | m are currer | not requ itly valid | uired to res OMB con | spond unl | ess | 1474 (9-02) |
| Reminder: 1. Title of Derivative Security | Report on a s | 3. Transaction Date | Table II - I | | ities warr 5. Nu of De See Ac (A Dis | Acquire rants, opt | Persons containe the form d, Dispose | who in the displayed of, exercise action I | his for ays a coor Bendle securable Date | eficiallities) 7. Ti Amo Unde | not required to the and the and the and the erlying | OMB conf | spond unl | of 10. Owners Form of Derivat Security Direct (or Indir | 11. Nath |

Reporting Owners

| | Relationships | | | | |
|---|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Jacoby Rebecca C/O QUANTUM CORPORATION 224 AIRPORT PARKWAY, SUITE 550 SAN JOSE, CA 95110 | X | | | | |

Signatures

| /s/ Josie Buensuceso, Attorney-in-Fact for Rebecca Jacoby | 09/06/2022 | |
|---|------------|--|
| **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) Grant of Restricted Stock Units ("RSUs"), each of which represents a contingent right to receive one share of common stock of QMCO (the "Company"). The RSUs vest in full on the earlier of September 1, 2023 or the date of the Company's next annual stockholder meeting, subject to continued service on the Company's Board of Directors.

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.