FORM 4

(Print or Type Responses)

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

OMB APPROVAL

OMB Number: 3235-0287

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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

I. Name and Address of Reporting Person – FETTER ELIZABETH A				2. Issuer Name and Ticker or Trading Symbol QUANTUM CORP /DE/ [QTM]							(Check all applicable) X Director 10% Owner					
	NTUM C	(First) ORPORATION, RIVE, STE. 800	(Middle) 1650	3. Date of E 04/12/201		ansacti	on (M	onth/	Day/Yea	r)		Officer (give ti	tle below)	Other (specify below)
(Street)				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						
SAN JOS	E, CA 951	.10										roini incu by wid	ic than One Re	porting r crson		
(City	y)	(State)	(Zip)			Table	I - No	n-De	erivative	Securitie	es Acqu	uired, Disposed of	f, or Benefic	cially Owned		
1.Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Ye		2A. Deemed Execution Date, if any (Month/Day/Year)		Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		C F	orm:	7. Nature of Indirect Beneficial			
				(Month/L	oay/ Y ear)	Со	de	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		o (1	r Indirect	Ownership (Instr. 4)
Common	Stock		04/12/2011			M	(1)		5,000	A	\$ 1.77	93,392		Γ)	
Common	Stock		04/12/2011			M	(1)		10,000	A	\$ 1.16	103,392		Ι)	
Common	Stock		04/12/2011			SC	<u>2)</u>		15,000	D	\$ 2.75	88,392		Γ	,	
Reminder: I	Report on a se	eparate line for each	class of securities be	eneficially ov	wned direc	ctly or	P	erso iis fo	orm are	not requ	iired t	e collection of i o respond unles I number.			in SEC 1	474 (9-02)
			Table II	- Derivative								Owned				
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if	4. Transaction Code	5. Numb	es (A) osed	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. To Sec.		Fitle and Amount Underlying purities str. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	Beneficia Ownersh (Instr. 4)			
												Amount		(111511. 1)	(111511. 4)	

Date

(D)

Code V (A)

M

M

Exercisable

Expiration

Date

12/01/2008(3) 09/01/2015

10,000 12/01/2009(3) 09/01/2016

Title

Common

Common

Stock

Number

Shares

5,000

10,000

\$0

\$0

28,000

56,000

D

D

Reporting Owners

\$ 1.77

\$ 1.16

04/12/2011

04/12/2011

Non-Qualified

Stock Options Non-Qualified

Stock

Options

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
FETTER ELIZABETH A C/O QUANTUM CORPORATION 1650 TECHNOLOGY DRIVE, STE. 800 SAN JOSE, CA 95110	X				

Signatures

/s/ Astrid Becker-Celik, Attorney in Fact for Elizabeth A. Fette	r

Signature of Reporting Person	Date							
Explanation of Responses:								

- ______
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Reflects the exercise of the stock options listed in Table II of this Form 4.

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

- (2) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 1, 2011.
- (3) The options are fully vested and immediately exercisable.

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.