Edgar Filing: CIENA CORP - Form 4

CIENA COR	Р											
Form 4												
April 14, 201	4											
FORM	4								-	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box									Expires:	January 31,		
if no longe subject to	STATE	MENT O	F CHAN	GES IN I	GES IN BENEFICIAL OWNERSHIP OF SECURITIES					2005		
Section 16	5.			SECUR					Estimated average burden hours per			
Form 4 or									response 0.			
Form 5 obligation	· ·							ge Act of 1934,				
may conti	Section 17	· · /		•	U	1 v		f 1935 or Sectio	n			
See Instru	ction	30(h)	of the In	vestment	Compan	y Act	: of 19	40				
1(b).												
(Print or Type R	esponses)											
(Thit of Type it	esponses											
1. Name and Ad	ddress of Reporting	g Person *	2 Issuer	Name and	Ticker or '	Fradin	σ	5. Relationship of	Reporting Per	Reporting Person(s) to		
NEVENS THOMAS MICHAEL Symbol				uer Name and Ticker or Trading ol [A CORP [CIEN]				Issuer				
			of Earliest Transaction				(Check all applicable)					
(Last)	(First)	(Middle)	(Month/D		ansaction			X Director	109	6 Owner		
C/O CIENA	CORPORATIO	ON. 7035	04/10/20	•				Officer (give		er (specify		
RIDGE RD.	00111011111		04/10/20	,11				below)	below)			
	(Street)		4 If Ame	ndment Da	te Original			6 Individual or Id	oint/Group Fili	ng(Check		
				endment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)				
Filed(Month/Day/Year)						_X_ Form filed by One Reporting Person						
HANOVER,	MD 21076-142	26						Form filed by M Person	Iore than One R	eporting		
								reison				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Da	ate 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	·	on Date, if	Transacti Code	onAcquired				Form: Direct	Indirect		
(Instr. 3)			any (Month/Day/Year)		Disposed (Instr. 3,			2	D) or indirect (I)	Beneficial Ownership		
		Day/Year) (Instr. 8) (Instr.						(Instr. 4)	(Instr. 4)			
						(A)		Reported				
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	04/10/2014			А	7,631	А	\$0	8,848 <u>(2)</u>	D			
Stock	0 11 10/2011				(1)		ψŪ	o,o io	-			

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
NEVENS THOMAS MICHAEL C/O CIENA CORPORATION 7035 RIDGE RD. HANOVER, MD 21076-1426	Х								
Signatures									
By: Erik Lichter For: Michael T Nevens	04/11/2014								
** Signature of Reporting Person		Date							
Evalenation of Dechanges									

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) Restricted Stock Units (RSUs) vest in three equal installments on March 20, 2015, 2016 and 2017.
- (2) Shares reported include unvested Restricted Stock Units (RSUs).

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.