Edgar Filing: CIENA CORP - Form 4

CIENA COR	P											
Form 4												
March 30, 20	15											
FORM	1										PPROVAL	
	UNITE	D STATES		ITIES A				NGE (COMMISSION	OMB Number:	3235-0287	
Check this box				8 /						Expires:	January 31,	
if no long subject to	STAT	EMENT O	F CHAN	GES IN	GES IN BENEFICIAL OWNERS					Estimated	2005	
-	Section 16. SECURITIES							burden hou	0			
Form 4 or										response	•	
Form 5 obligation	· · ·							-	ge Act of 1934,			
may conti		· · ·		•		U			f 1935 or Sectio	n		
See Instru		30(h)	of the In	vestmen	t C	Company	y Act	of 19	40			
1(b).												
(Print or Type R	esponses)											
(I fint of Type R	(csponses)											
1. Name and A	ddress of Reporti	ng Person *	2 Issuer	Name an	гы	Ficker or T	Fradin	σ	5. Relationship of	f Reporting Per	son(s) to	
Rowny Michael J Symbol				Issuer Name and Ticker or Trading					Issuer			
·			•	CORP	CI	ENI						
(Lost)	(Last) (First) (Middle) 3. Date of Earliest Transaction					(Check all applicable)						
(Last)	(First)	(Middle)	(Month/D		rai	isaction			X Director	100	6 Owner	
C/O CIENA	CORPORAT	ION. 7035	03/26/20	•					Officer (give		er (specify	
RIDGE RD.	0010 01011	1011,7000	05120120	,15					below)	below)		
	(Street)		4 If Ame	ndment D)ote	Original			6 Individual or I	oint/Group Fili	ng(Check	
				f Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
T ned(wonth									_X_ Form filed by One Reporting Person			
HANOVER,	, MD 21076-1	426							Form filed by M Person	More than One R	eporting	
		(7:)							1 crson			
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction	Date 2A. Dee	emed	3.		4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if		tio	nAcquired			Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month	/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Ivionus	za, iou) (mou, o) (mou.			(Instr. 5,	i una	5)	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
				Code	V	Amount	(D)	Price	(insu. 5 and 4)			
Common Stock	03/26/2015			А		8,417 (1)	А	\$0	70,791 (2)	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)

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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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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						
I B	Director	10% Owner	Officer	Other			
Rowny Michael J C/O CIENA CORPORATION 7035 RIDGE RD. HANOVER, MD 21076-1426	Х						
Signatures							
By: Erik Lichter For: Michael J Rowny	. 03/30/2015						
**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) Restricted Stock Units (RSUs) vest in three equal installments on March 20, 2016, 2017 and 2018.
- (2) Shares reported include unvested Restricted Stock Units (RSUs) and Performance Stock Units (PSUs).

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.