Edgar Filing: CIENA CORP - Form 4

CIENA COR	Р											
Form 4												
March 30, 20	15											
FORM	Δ										PPROVAL	
	UNITE	D STATES		ITIES A				NGE (COMMISSION	OMB Number:	3235-0287	
Check this				5 /						Expires:	January 31,	
if no long subject to	er STATI	EMENT O	F CHAN	GES IN	GES IN BENEFICIAL OWNER				NERSHIP OF		2005 average	
-	Section 16. SECURITIES							Estimated average burden hours per				
Form 4 or	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 K	esponses)											
1. Name and A	ddress of Reportin	ng Person *	2 Issuer	Name an	тh	licker or T	Fradin	σ	5. Relationship of	f Reporting Per	son(s) to	
FITT LAWTON W Symbol				ssuer Name and Ticker or Trading					Issuer			
			CIENA	CORP [CI	EN]						
(Last)					(Check all applicable)							
(Last)	(14150)	(Midule)	(Month/D		Tar	Isaction			X Director	109	6 Owner	
C/O CIENA	CORPORAT	ION. 7035	03/26/20	•					Officer (give		er (specify	
RIDGE RD.		- ,	00/20/20	,10					below)	below)		
	(Street)		4 If Ame	ndment D)ate	Original			6 Individual or I	oint/Groun Fili	ng(Check	
				If Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
)				_X_ Form filed by	1 0		
HANOVER,	MD 21076-14	426							Form filed by M Person	More than One R	eporting	
(Citar)	(Stata)	(7:0)							1 013011			
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction I			3.		4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if	TransactionAcquired (A) or					Securities	Form: Direct	Indirect Beneficial	
(Instr. 3)		any (Month)	/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Ownership		
					(insuries, rundis)			Following	(Instr. 4)			
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
				Code		Amount	(D)	Price	(msu. 5 and 4)			
Common Stock	03/26/2015			А		8,417 (1)	А	\$0	68,291 <u>(2)</u>	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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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				
FITT LAWTON W C/O CIENA CORPORATION 7035 RIDGE RD. HANOVER, MD 21076-1426	Х							
Signatures								
By: Erik Lichter For: Lawton W. Fitt		03/30/201	5					
**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).

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.