Edgar Filing: CIENA CORP - Form 4

CIENA COR	RP										
Form 4											
January 31, 2	2013										
FORM	14							OMB AF	PROVAL		
	UNITED 5	TATES SECU Wa	RITIES A ashington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Check the if no long								Expires:	January 31, 2005		
subject to		ENT OF CHAI	ANGES IN BENEFICIAL OWNERSHIP				NERSHIP OF	Estimated average			
Section 1	Section 16. S				SECURITIES				burden hours per		
Form 4 o Form 5			16() 6.1	a .				response	0.5		
obligation	*	uant to Section				•					
may cont	inue. Section 17(a)	30(h) of the I	•	•	· ·		1935 or Section	n			
See Instru 1(b).	uction	50(II) 01 the I	iivestiiieiit	Compan	y Ac	t OI 194	Ю				
1(0).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u></u> 2. Issuer Name and Ticker or Trading					ng	5. Relationship of	Reporting Pers	on(s) to			
SMITH GA	RY B	Symbol	nbol				Issuer				
CIEN			IENA CORP [CIEN]				(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of			of Earliest Transaction			(choose an approach)				
			Day/Year)				_X_ Director		Owner		
	CORPORATION	N, 1201 01/29/2	2013				XOfficer (give below)	title Othe below)	er (specify		
WINTERSC	ON ROAD						PRES	SIDENT, CEO			
	(Street)	4. If Am	endment, Da	ate Origina	l		6. Individual or Jo	int/Group Filin	g(Check		
Filed(Mor			(Month/Day/Year)				Applicable Line)				
							X Form filed by C Form filed by M				
LINTHICU	M,, MD 21090						Person		porting		
(City)	(State) (Z	Zip) Tal	ole I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	if Transaction(A) or Disposed of (D)				Securities	Form: Direct				
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				Beneficially Owned		Beneficial Ownership		
		(Wohth Duy Tear)	(1131.0)				Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
			Code V	Amount	(D)	Price	(msu. 5 and +)				
Common	01/00/0012		C	6,200	D	\$	270.7(2)(3)	D			
Stock	01/29/2013		S	(1)	D	15.31	372,763 <u>(3)</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 SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

(2)

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	Secur	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				
SMITH GARY B C/O CIENA CORPORATION 1201 WINTERSON ROAD LINTHICUM,, MD 21090	Х		PRESIDENT, CEO					
Signatures								
By: Erik Lichter For: Gary B Smith		01/31/2013						
**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) Sales were effected pursuant to 10b5-1 trading plan dated March 21, 2012.
- (2) Reflects the weighted average sales price with transactions in a range of sales prices from \$15.355 to \$15.71. Upon request by the SEC, full information regarding the number of shares sold at each separate sales price will be provided.
- (3) 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.