FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CH	ANGES II	N BENEFICI	AL OWN	NERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
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hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SMITH GARY B				2. Issuer Name and Ticker or Trading Symbol CIENA CORP [CIEN]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) C/O CIE	(Fir	,	Middl	le)	3. Date of Earliest Transaction (Month/Day/Year) 01/16/2024								X	X Officer (give title below) Preside			Other (s below)	specify	
7035 RIDGE RD.				4. If Amendment, Date of Original Filed (Month/Day/Year)							, I	Individual or Joint/Group Filing (Check Applicable Line)							
(Street) HANOV	ER MI	2 MD 21076-1426											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1	
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication													
					X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								nded to						
		Table	1 - 1	Non-Deriva	tive S	Secui	rities	Acc	quire	ed, Di	sposed o	of, or	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution Da		n Date,	Date, Transa Code (ction [nd 5) Secu Ben Own		urities Fo eficially (D) ned Following Inc		n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership		
						С		ode	v A	Amount	(A) or (D)	Price		Reported (Instr. 3 and 4)		(Inst	1. 4)	(Instr. 4)	
Common Stock 01/1			01/16/202	s 4,166 ⁽¹⁾ D \$5			\$50.561	18 ⁽²⁾ 494,844 ⁽³⁾ D											
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if a	Deemed ecution Date, ny onth/Day/Year)	Transaction of Det Sec Act (A) Dis of (Instr. and Instr. and Instruction and Ins		of Deriva Secur Acqui (A) or Dispo of (D)	of Expirative (Month Securities A) or Oisposed of (D) Instr. 3, 4		iration [Exercisable and on Date Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
							(A)	(D)	Date Exercisal		Expiration Date	ı Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Sales were effected pursuant to Rule 10b5-1 trading plan dated 03/11/2023
- 2. Reflects the weighted average sales price with transactions in a range of sales from \$49.98 to \$50.95. 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) and Performance Stock Units (PSUs).

By: Michelle Rankin For: 01/17/2024 Gary B Smith

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.