FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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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 7									
1. Name and Address of Reporting Person* PETRIK ANDREW C					2. Issuer Name and Ticker or Trading Symbol CIENA CORP CIEN									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
PETRI	<u>K ANDR</u>	<u>EW C</u>			==		1100		CILLY J	•						Director	r	10% (Owner	
							Details Finding Transaction (March (Day (March									Officer (below)	(give title	Other below	(specify	
(Last)	(Fi	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)									VP, CONTROLLER					
C/O CIENA CORPORATION				01/	01/15/2020									•	1, 0011	TROLLLIN				
7035 RIDGE RD.																				
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable					
(0++)					-	,		Date	· Ongina		a (o	<i>,,</i>	α.,		ine)	uu. 0. 0.	оа отоар	· · ······g (0.1001.7	фричало	
(Street)	ED 16		24056 44	20											X	Form file	led by One	Reporting Pers	son	
HANOV	ER M	D ,	21076-14	26												Form file	led by Mor	e than One Rep	oorting	
					-											Person			.	
(City)	(St	ate) (Zip)																	
		Tab	le I - No	n-Deriv	vative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	r Ben	efici	ally O	wned				
1. Title of S	Security (Inst	r. 3)		2. Trans	action				3.									6. Ownership	7. Nature	
				Date (Month/I	Dav/Yea	Execution Date		ı Date,	Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4		3, 4 aı	and Securi			Form: Direct (D) or Indirect	of Indirect Beneficial		
,,,,,,				l`			(Month/Day/Year)				'	,			Own		ollowing	(l) (Instr. 4)	Ownership (Instr. 4)	
										v	Amount		(A) or Pr		_ т	eported ransacti	ion(s)		(111511. 4)	
									Code	Ľ	Amount	(D) P110		FIICE	(Instr.		ınd 4)			
Common Stock 01/15				15/2020				S		2,000(1	1)	D	\$41	.82	2 48,125 ⁽²⁾		D			
		Tá	able II - I	Derivat	tive S	ecu	rities	Acaui	ired. D	ispo	osed of,	or B	3enefi	ciall	v Owr	ned				
											onvertib				,					
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deem		4.				6. Date Exercisable and Expiration Date			7. Title and			8. Price of		Number of		11. Nature	
Derivative Security	Conversion or Exercise Price of		Execution if any			ransaction Code (Instr.				on Dai Day/Ye		Amount of Securities			Derivat Securit		erivative ecurities	Ownership Form: Direct (D)	of Indirect Beneficial Ownership	
(Instr. 3)			(Month/Da	ay/Year)	8)		Securities		•	Und	derlying		(Instr. !	5) Βe	Beneficially					
Derivative Security							Acquired (A) or						Derivative Security (Instr.		s		Owned Following	or Indirect (I) (Instr. 4)	(Instr. 4)	
					Dispo		Disposed and 4)								eported	(a)				
						of (D) (Instr. 3, 4										Transaction(s (Instr. 4)	"			
						and 5)									- 1					
				l									Amo or Num							
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	1		I		Code	V	(A)	(D)	Exercisa	ible	Date	Title	e Sha	ires				1	1	

Explanation of Responses:

- 1. Sales were effected pursuant to Rule 10b5-1 trading plan dated 06/17/2019.
- 2. Shares reported include unvested Restricted Stock Units (RSUs) and Performance Stock Units (PSUs).

By: Michelle Rankin For:
Andrew C. Petrik

01/16/2020

** 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.