FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
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

					_						ilpully Act										
1. Name and Address of Reporting Person*							2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ALEXANDER STEPHEN B							CIENA CORP [ CIEN ]									Direc	,	10%	Owner		
,		-										X		er (give title		r (specify					
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 05/15/2015									belov	,	belo	,		
C/O CIENA CORPORATION															Sr VP Chief Technology Officer						
7035 RIDGE RD.																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)						, , , ,									Line)						
HANOVER MD 21076-1426				26											X Form filed by One Reporting Person						
					.										Form filed by More than One Reporting Person						
(City)	(St	ate) (	Zip)												r GISOII						
(Oity)	(50	uic) (																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of S	ecurity (Inst	r. 3)		2. Transa	action					3. 4. Securities Acquired (A)							ount of	6. Ownership	7. Nature		
Date (Month/Da						ay/Year) Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 5)  Disposed Of (D) (Instr. 3, 4 and 5)			O) (Instr.	3, 4 aı	1d			Form: Direct (D) or Indirect	of Indirect Beneficial			
[`													Owned F Reported			(I) (Instr. 4)	Ownership (Instr. 4)				
					Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(,						
							-	_		<del>-   `   -  </del>			<del>-  `-</del>		•						
Common Stock 05/15/2									S		3,500(1	(1) D \$		\$22	.29	9 152,234 <sup>(2)</sup>		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
(e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of	2.	3. Transaction	3A. Deem	ed	4.		5. Number		6. Date Exercisable ar		sable and	7. Title and			8. Price		9. Number o	f 10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any	n Date,	Transa Code (				Expiration Date Amount of (Month/Day/Year) Securities					Derivative Security		derivative Securities	Ownership Form:	of Indirect Beneficial			
(Instr. 3)				ay/Year)	8)			Securities		Underlying					(Instr. 5)		Beneficially Owned	Direct (D)	Ownership		
							Acquired (A) or		Derivative Security (Instr.					str. 3			Following	(I) (Instr. 4			
				Disposed of (D)			and 4)								Reported Transaction	(s)					
							(Instr. 3, 4 and 5)								(Instr. 4)						
									1		Amou		ount								
	Code										or										
									Date		Expiration		of	mber							
			Code	V	(A)	(D)	Exercisa	ble	Date	Title	e   Sha	ares				- 1	1				

## Explanation of Responses:

- 1. Sales were effected pursuant to Rule 10b5-1 trading plan dated 9/19/2014.
- 2. Shares reported include unvested Restricted Stock Units (RSUs).

By: Erik Lichter For: Stephen B. Alexander

05/18/2015

\*\* 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.