## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
---------------	------	-------

STATEMENT OF CHAI	NGES IN BENEFIC	IAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5
	OMB Number: Estimated average burde

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 ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					1											X Dire		ctor 1		10% C	wner	
(Last)	(Fi	rst) (	Middle)		3. D	ate (	of Earli	est Tran	sactio	on (Mon	th/E	Day/Year)			$\dashv$		X Officer (give title below)			Other below)	(specify	
C/O CIENA CORPORATION					12/	12/14/2010									President, CEO							
1201 WINTERSON ROAD																						
					- 4. If	Ame	endmei	nt, Date	of Or	riginal Fi	led	(Month/Da	ay/Yeaı	r)	6	6. Individual or Joint/Group Filing (Check Applicable						
(Street)												`			L	Line)						
LINTHIC	CUM M	D 2	21090													X		n filed by One				
					-												Form Pers	n filed by Moi on	re tha	an One Rep	orting	
(City)	(S	tate) (	Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date					/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		,   T	Transaction Dispos Code (Instr. 5)		Disposed	rities Acquired (A) ed Of (D) (Instr. 3, 4			4 and Secu Bene Own		rities ficially ed Following		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										Code V		Amount	(A (I	A) or D)	Price	_  т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 1					4/2010				1	A <sup>(1)</sup>		127,06	60	Α	\$1	9.1	.1 626,254			D		
Common Stock 12/					4/2010				١.	A <sup>(2)</sup>		31,76	0	Α	\$1	9.1 658,014 <sup>(3)</sup>		8,014(3)		D		
		Та	ıble II - I														ned					
			(	e.g., p	uts, c	alls	s, wai	rants	, op	tions,	CC	onvertib	le se	curit	ies)							
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date Execution Diff any (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		of I		Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Deriva Securi	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
		Coo		Code	v	(A)	(D)				Expiration Date	Amoun or Numbe of Title Shares		nber								

## **Explanation of Responses:**

- 1. Reflects Restricted Stock Units (RSUs) that vest over four years, with one-sixteenth of the grant amount vesting on March 20, June 20, September 20, and December 20 of each year, commencing on March 20, 2011.
- 2. Reflects Performance Stock Units (PSUs) for which the vesting is subject to the achievement of certain performance goals and an additional service period. Based upon the timing of achievement of the performance goals, the target amounts reported may increase by as much as an additional 70% of the grant amount reported above.
- 3. Shares reported include unvested Restricted Stock Units (RSUs).

## Remarks:

By: Erik J. Lichter For: Gary B. Smith

12/16/2010

\*\* 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.