FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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CTATEMENT	OF OUR MORE IN DENERIOUS	OVANIEDCI IID
STATEMENT	OF CHANGES IN BENEFICIAL	OWNERSHIP

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on, D.C. 20549	OMB APPROVAL
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	OMB Number:	3235-0287
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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

Name and Address of Reporting Person*     SMITH GARY B					2. Issuer Name and Ticker or Trading Symbol CIENA CORP [ CIEN ]									ck all applica	· '				
	NA CORPO	irst) ORATION	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/18/2018									X Officer (give title below) Other (spibelow)  PRESIDENT, CEO			
/035 RII	OGE RD.				_ 4.	. If Am	endment, D	Date of	f Original F	iled	(Month/Da	y/Year)	)	6. Inc	lividual or Jo	int/Group	Filing (	Check Appl	icable
(Street) HANOVER MD 21076-142		26		Line)  X Form filed by One Repo Form filed by More than								•	Ü	ng					
(City)	(5	State)	(Zip)												Person				
		Ta	able I - No	n-Der	rivati	ive S	ecurities	s Ac	quired,	Dis	posed o	of, or	Ber	neficially	Owned				
Dat			Date	. Transaction late Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					d (A) or r. 3, 4 and 5)	Beneficial Owned Fo	ly	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Reported Transaction (Instr. 3 ar				(Instr. 4)	
Common Stock 12/2				12/1	18/20	/2018		A		86,930(1)		A	\$0.0	593,288(2)		D			
Common Stock 12			12/1	18/20	3/2018		A		132,611 <sup>(3)</sup>		A	\$0.0	725,899(2)			D			
			Table II -				curities Ils, warr								Owned				
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/Yea	ate, 1	Code (Inst				6. Date Expiration (Month/Da	n Dat	е	of Securities		es J Derivative	8. Price of Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin Reported	es Ownes For ally or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		Transaction(s) (Instr. 4)			
Market Stock Units	\$0.0	12/18/2018			A		52,158 <sup>(4)</sup>		(5)		(5)	Comr		52,158 <sup>(4)</sup>	\$0.0	52,158	3 <sup>(4)</sup>	D	

## **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,
- 2. Shares reported include unvested Restricted Stock Units (RSUs) and Performance Stock Units (PSUs).
- 3. Reflects the number of stock units earned pursuant to the terms of a performance stock unit award granted on 12/12/2017 reflecting the achievement of the related performance conditions. These shares vest in equal 1/2 amounts on each December 20, 2018 and 2019.
- 4. Each market stock unit (MSU) represents the contingent right to receive, following vesting, between 0% and 200% of one share of the Issuer's common stock, subject to the level of achievement of applicable total shareholder return (TSR) performance conditions over a three-year period from fiscal 2019 through fiscal 2021.
- 5. The MSUs will vest on December 20, 2021, subject to the performance conditions described above.

By: Michelle Rankin For: Gary

12/20/2018

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.