

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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.	2. Issuer Name and Ticker or Trading Symbol										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Kambiz Hoos	hmand			I	NF	INE	RA (COR	P [[INF	N]									
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)									,				10% Owner		
					5/18/2011										Officer (give title below) Other (specify below)					
C/O INFINER CORPORATI		9 JAV	A					5/18)/ <u>Z</u>	U11										
DRIVE																				
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)										6. Individual or Joint/Group Filing (Check Applicable Line)					
SUNNYVALI	E, CA 94	1089												V. F	C"1 11 0	D				
(City) (State) (Zip)															X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table 1	I - Non-I	Deriv	ati	ve Sec	curitie	es Acq	ui	red, D	ispo	osed	l of, c	or Beneficiall	y Owned	ĺ				
1.Title of Security 2.			2. Tra Date	ans.	2A. Deen Exect Date,	ned C	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) Disposed of (I (Instr. 3, 4 and) or (D)	Foll (Ins		t of Securities Beneficially Owned g Reported Transaction(s) nd 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
						any		Code	V	Amount (A) or (D)			ce					(Instr. 4)		
Common Stock 5/1				5/19/	19/2011			M		5500	A	\$0		5500			D			
T. 1.			a	<u> </u>		0 11		1./									•	ļ.		
1. Title of Derivate	le II - Dei 2.	3. Trans.	Securition 3A.	es Be		f icially 5. Numl			_	puts,		\neg		cants, options		9. Number	1ties)	11. Nature		
Security (Instr. 3)	Conversion or Exercise Price of Derivative Security		Deemed Execution Date, if any	Trans. Code (Instr. 8)		Derivati Securiti Acquire Dispose	Derivative ecurities acquired (A) or Disposed of (D. Instr. 3, 4 and		and Expiration			on Date Secu		Underlying e Security	Derivative Security (Instr. 5)		Ownership Form of Derivative			
				Code	v	(A)	(D)	Date Exercisa		Expiration le Date		¹ Titl	le	Amount or Number of Shares		Transaction (s) (Instr. 4)	4)			
Restricted Stock Units	(1)	5/19/2011		M			5500	(2)		2)		mmon tock	5500	\$0	0	D			
Restricted Stock Units	(1)	5/18/2011		A		9100		(3)		3)		mmon tock	9100	\$0	9100	D			
Non-Qualified Stock Option (Right to Buy)	\$7.25	5/18/2011		A		17600		(4)	5/18/	2021		mmon tock	17600	\$0	17600	D			
Non-Qualified Stock Option (Right to Buy)	\$7.55							(5)	5/19/	2020		mmon tock	14500		14500	D			

Explanation of Responses:

- (1) Each restricted stock unit ("RSU") represents a contingent right to receive one share of INFN common stock.
- (2) The RSUs fully vested on May 19, 2011.
- (3) The RSUs fully vest on May 18, 2012.
- (4) The option fully vests on May 18, 2012.

(5) The option fully vested on May 19, 2011.

Reporting Owners

Danautina Oryman Nama / Adduses	Relationships								
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other				
Kambiz Hooshmand									
C/O INFINERA CORPORATION									
	X								
169 JAVA DRIVE									
SUNNYVALE, CA 94089									

Signatures

/s/ Michael O. McCarthy III, by Power of Attorney 5/20/201

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 control number.

^{**} Signature of Reporting Person