FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burden								
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	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
ı	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*									ker or Tradii	,			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Murry Stefan J.						OI	_	<u> </u>	JELLO	1110	11100	L	Direct			10% Ow	-			
(Last) (First) (Middle)						101	ı						X Office below	(give title	Other (sp below)		pecify			
							3. Date of Earliest Transaction (Month/Day/Year)								Chief Strategy Officer					
C/O APPLIED OPTOELECTRONICS, INC.						01/28/2014														
13115 JESS PIRTLE BLVD.							If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)						7 1110	marrient,	Date.	or Originar i		ivioniii) Di		Line)							
,	LAND T	X	77478											X Form	filed by One	Repo	orting Persor	1		
												Form filed by More than One Reporting Person								
(City)	(5	State)	(Zip)																	
		Tab	le I - Non	-Deriv	ative	Se	curitie	s Ac	quired, D	Dispo	osed c	of, or Be	neficial	ly Owne	d					
1. Title of	Security (Ins	str. 3)	action		2A. Deem		3. 4. Securities					5. Amou			. Nature					
Date (Month/Da					Day/Ye	ay/Year) Execution Date, if any (Month/Day/Yea			Code (Instr. 5)		d Of (D) (Instr. 3, 4 a		Benefic	ally	(D) or	r Indirect	of Indirect Beneficial			
ľ														Owned Reporte	d ['''			Ownership (Instr. 4)		
					Code				v	Amount	ount (A) or Pr		Transac (Instr. 3	tion(s)			,			
			tivo (ive Securities Acqui				isposed of, or Benefic			oficially	Owned								
									, options					Owned						
1. Title of	2.	3. Transaction	3A. Deeme		4.		5. Num	ber	6. Date Exer		le and	7. Title an		8. Price of	9. Number		10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any		Transa Code (l				Expiration D (Month/Day)			Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	derivative Securities Beneficially Owned Following Reported		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
(Instr. 3)	Price of Derivative		(Month/Day	/Year) 8)	8)					•				(Instr. 5)						
	Security																			
					of (D)									Transaction(s)						
							(Instr. 3, 4 and 5)								(11150.4)					
													Amount	1						
													or Number							
					Code	v	(A)	(D)	Date Exercisable		oiration te	Title	of Shares							
Incentive										\dagger		Common								
Stock Option	\$13.84	01/28/2014			A		5,000		(1)	01/2	28/2024	Stock,	5,000	\$0	5,000		D			
(Right to	1 415.54	01/20/2014					5,000		.,			\$0.001 par value]	•	5,500					
Buy)																				

Explanation of Responses:

1. The stock option grant vests as to 1/4th of the total number of shares on January 28, 2015 and thereafter vests and shall continue to vest as to 1/6th of the remainder of the shares in equal semi-annual installments until all shares have vested

installments until all shares have vested.

/s/ David C. Kuo for Stefan J. Murry

01/30/2014

** 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.