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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).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Number: Estimated average burden hours per response ...

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Respon | nses) | | | | | | | | | | |
|--|------------|--|--|---|---|---|-----------------------------------|---|---|----------------------------------|---|
| 1. Name and Address of Reporting Person [*] | | | 2. Issuer Name and Ticker or Trading Symbol Vuzix Corp [VUZI] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | |
| (Last) (2166 BRIGHTON TOWNLINE RO. | | 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2013 | | | | | 1 | Officer (give titleOther (specify below) below) | | | |
| (ROCHESTER, N | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) (| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | Owned | | |
| 1.Title of Security (Instr. 3) | | Exect any | Deemed ution Date, if th/Day/Year) | 3. Transact Code (Instr. 8 Code |) | 4. Securi Acquired Disposed (Instr. 3, Amount | 1 (A) of (I 4 and (A) or |)) | Following Reported Transaction(s) (Instr. 3 and 4) | Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 01/02/2015 | | | А | | 25,000 | A | \$0 | 25,000 | D | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
|--|------------------------|--------------------------|---|------|------|--|------|---------------|------------------------------------|-----------------|--|---------------------------|--------------------------|-----------|------------|
| Security | Conversion | Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | tion | of Expira | | Expiration Da | Expiration Date Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | Derivative Securities | Ownership | Beneficial |
| | Derivative Security | | | | | Acquired (A) or Dispose (D) (Instr. 3, and 5) | d of | | | | Following Reported Transaction(s) | Direct (D) or Indirect | (Instr. 4) | | |
| | | | | Code | v | (A) | | Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Options | \$2 | 08/05/2013 | | А | | 15,000 | | 08/05/2013 | 08/05/2023 | Common Stock | 15,000 | \$0 | 15,000 | D | |
| Options | \$ 2.7 | 08/18/2014 | | А | | 30,000 | | <u>(1)</u> | 08/18/2024 | Common Stock | 30,000 | \$0 | 30,000 | D | |

Reporting Owners

| Deporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| RUCKDAESCHEL ALEXANDER 2166 BRIGHTON HENRIETTA TOWNLINE ROAD ROCHESTER, NY 14623 | х | | | | | | |

Signatures

| /s/ Alexander Ruckdaeschel | 01/06/2015 |
|-------------------------------|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

* 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).

(1) The options shall vest in 12 equal installments monthly from the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.