FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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

(Print or Type Resp	onses)										
Name and Addre Russell Grant	ess of Reporting Pers	son *	2. Issuer N Symbol Vuzix Cor				ading		5. Relationship of Repositions (Check all X Director	orting Perso applicable)	
VUZIX CORPO CENTRE DR	(First) (Middle PRATION, 75 TO		3. Date of E (Month/Day 02/07/201	/Year)	ansa	action		lt [_X_ Officer (give title eelow)	Other (specify below)
ROCHESTER, N	4. If Amendment, Date Original Filed(Month/Day/Year)					. A	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									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execu any	eemed tion Date, if th/Day/Year)	3. Transac Code (Instr. 8		4. Securi (A) or D (D) (Instr. 3,	4 and (A) or	ed of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock									11,913,777	D	
Common Stock									100,000	I	by son
Common Stock	02/07/2011			Р		63,000	A	\$ 0.0981	163,000	I	by son
Common Stock	02/08/2011			P		70,000	A	\$ 0.10	233,000	I	by son
Common Stock	02/09/2011			P		17,000	A	\$ 0.10	250,000	I	by son
Reminder: Report o directly or indirectly	n a separate line for o	each cla	ass of securit	ies benef	icial	ly owned					
					ir re	nformati equired	on co to re	ontaine spond (d to the collection d in this form are r unless the form dis control number.	ot	SEC 1474 (9-02)

$\label{limit} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exerci	isable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	Num	ber	Expiration Da	te	of Underlyi	ng	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Y	Year)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			(Instr. 3 and	14)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu	rities						Owned	Security:	(Instr. 4)
	Security					Acqu	ired						Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
						Disp	osed						Transaction(s)	(I)	
						of (D)						(Instr. 4)	(Instr. 4)	
						(Instr	r. 3,								
						4, and	d 5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Date	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				
Warrant										~					
	\$ 0.2849							12/24/2000	12/23/2012	Common Stock	50.000		50,000	T	by son
_	φ 0.2049							12/24/2009	12/23/2012	Stock	50,000		50,000	1	by soil
buy)															

Reporting Owners

Reporting Owner Name / Address		I	Relationships	
Reporting Owner Name / Address		10% Owner	Officer	Other
Russell Grant				
VUZIX CORPORATION	X		CFO and Executive VP	
75 TOWN CENTRE DR	Λ		CI O and Executive VI	
ROCHESTER, NY 14623				

Signatures

/s/ Grant Russell	02/11/2011
**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).

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.