### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasnington,	D.C.	20549	

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

1. Name and Address of Reporting Person*  Steckel Ronald						2. Issuer Name <b>and</b> Ticker or Trading Symbol IRIDEX CORP [ IRIX ]								Check	tionship of Reporti all applicable) Director Officer (give title		10% C			
(Last) (First) (Middle) 1212 TERRA BELLA AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 01/09/2015									X		below) below			
(Street)  MOUNT VIEW	AIN CA	A 5	94043		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						S. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				on				
(City)	(St	ate) (	Zip)																	
		Tabl	e I - No	n-Deriv	/ative	Se	curitie	s Ac	quired	, Dis	posed o	f, or	Bene	eficia	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,					ties Acquired (A) I Of (D) (Instr. 3, 4			4 and Se		Securities Beneficially		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) or (D)		Price	e Trans (Instr		action(s) 3 and 4)			` ,
Common Stock 01/09/					9/2015						30,000	(1) A		\$	\$0		31,964		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code ( 8)		of Deriv	rities ired r osed ) : 3, 4	6. Date Expirati (Month/	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	Deriv Secu	Price of Privative ecurity Istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Nun of Sha	nber res						

#### **Explanation of Responses:**

1. Each restricted stock unit ("RSU") represents a contingent right to receive one (1) share of the Issuer's Common Stock. The RSU award shall vest as follows: (i) 20% of the RSUs will vest upon the grant date, and an additional 20% of the RSUs will vest upon each of the first, second, third and fourth anniversary of the grant date, (ii) an additional 10,000 of the RSUs will vest 60 days following the fourth anniversary of the grant date if the average closing price of the Issuer's Common Stock during the prior 60 day period equals or exceeds 100% of his target average closing price and (iii) an additional 20,000 of the RSUs will vest 60 days following the fourth anniversary of the grant date if the average closing price of the Issuer's Common Stock during the prior 60 day period equals or exceeds 120% of his target average closing price.

# Remarks:

/s/ Susan Bruce, Attorney-in-Fact for Ronald Steckel 01/14/2015

\*\* 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.