FORM 3

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

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number 3235-0104 Estimated average burden

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											libuis per les	ponse.	0.5	
1. Name and Address of Reporting Person <sup>*</sup> <u>Mokari Atabak</u>				2. Date of Event Requiring Statement (Month/Day/Year) 07/11/2016			ame <b>and</b> Ticker or Trading Symbol X CORP [ IRIX ]							
(Last) 1212 TERRA BELLA (Street)	(First)	(Middle)				4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) CFO and VP, Corp Deve			10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     First Filed by Une Reporting Person			
MOUNTAIN VIEW CA 94043							,,				Form filed by More than One Reporting Pers			
(City)	(State)	(Zip)												
	Table I - Non-Derivative Securities Beneficially Owned													
									3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 4)				2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Deriva (Instr. 4)			Exercise P of Derivativ		ice Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
				Date Exercisable	Expiration Date	Title		I	Amount or Number of Shares	Security				

Explanation of Responses: Remarks:

No securities are beneficially owned.

## <u>/s</u>/ S orney-in-Fact for Atabak 07/13/2016

Mokari \*\* 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 5 (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.

## POWER OF ATTORNEY

The undersigned, as a Section 16 reporting person of IRIDEX Corporation (the "Company"), hereby constitutes and appoints Susan Bruce, the undersigned's true and law

The undersigned hereby ratifies and confirms all that said attorneys-in-fact and agents shall do or cause to be done by virtue hereof. The undersigned acknowledges

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersigned's

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 27th day of June, 2016.

Signature: /s/ Atabak Mokari

Print Name: Atabak Mokari