SEC Form 4

Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI | STATEMENT | OF C | HANGES | IN BENEF | ICIAL | OWNERSHIP |
|---------------------------------------------|-----------|------|--------|----------|-------|------------------|
|---------------------------------------------|-----------|------|--------|----------|-------|------------------|

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 [*] BEAUDOIN THOMAS L | | | 2. Issuer Name and Ticker or Trading Symbol <u>Cerence Inc.</u> [CRNC] | | 5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10% | | | | |
|----------------------------------------------------------------------------------|---------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------|-----------------------|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2024 | | Officer (give title below) | Other (specify below) | | | |
| 25 MALL ROAD SUITE 416 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| | | | | Line) | | | | | |
| | | | | X | Form filed by One Reporting Person | | | | |
| (Street) BURLINGTON | МА | 01803 | | | Form filed by More th Person | an One Reporting | | | |
| | | | Rule 10b5-1(c) Transaction Indication | , | | | | | |
| (City) | (State) | (Zip) | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------|------|---|-------------------------------------------------------------------------|---------------|----------------|---------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 05/07/2024 | | S | | 5,464 ⁽¹⁾ | D | \$ 9.69 | 242,457 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (3-, | , | , . | | , | | | | | / | | | |
|-----------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|-----|----------------------------------------------------------------------------------------------------------------------------|-----|-------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | Acquired Derivative Owned (A) or Security (Instr. Following Disposed 3 and 4) Reported | | Expiration Date (Month/Day/Year) ed ed | | Expiration Date Amount of Month/Day/Year) Securities Underlying Derivative Security (Instr. | | derivative Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Represents the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of RSUs. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the Reporting Person.

| <u>/s/ Jennifer</u> in-Fact | <u>Salinas, Attorney-</u> | 05/08/2024 |
|--------------------------------|---------------------------|------------|
| ** Signature of | 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.