

MARIPURI SATISH
Form 4
December 01, 2017

FORM 4

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

OMB APPROVAL

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
MARIPURI SATISH

2. Issuer Name and Ticker or Trading Symbol
Nuance Communications, Inc.
[NUAN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
ONE WAYSIDE ROAD
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
11/29/2017

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
EVP & GM Healthcare

BURLINGTON, MA 01803

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Common Stock	11/29/2017		A ⁽¹⁾		11,453	A	\$ 0.001
Common Stock	11/29/2017		A ⁽²⁾		5,062	A	\$ 0.001
Common Stock	11/29/2017		F ⁽³⁾		2,381	D	\$ 16.37
Common Stock	11/29/2017		A ⁽²⁾		17,855	A	\$ 0.001
Common Stock	11/29/2017		F ⁽³⁾		8,399	D	\$ 16.37

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Common Stock	11/29/2017	A ⁽²⁾	20,550	A	\$ 0.001	168,173	D
Common Stock	11/29/2017	F ⁽³⁾	9,667	D	\$ 16.37	158,506	D
Common Stock	11/29/2017	A ⁽²⁾	19,202	A	\$ 0.001	177,708	D
Common Stock	11/29/2017	F ⁽³⁾	9,032	D	\$ 16.37	168,676	D

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

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(9-02)

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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned (Instr. 5)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MARIPURI SATISH ONE WAYSIDE ROAD BURLINGTON, MA 01803				EVP & GM Healthcare

Signatures

By: /s/ Donna Belanger For: Satish Maripuri
Date: 12/01/2017

__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) Grant of Restricted Stock Units that will vest 100% on December 1, 2017 issued pursuant to the FY2017 Bonus program.
- (2) These shares are pursuant to a performance-based restricted stock unit agreement with the company whereby targets defined by the Compensation Committee were deemed to be achieved for fiscal year 2017.
- (3) These shares were withheld by the Company to cover the tax liability due upon the vesting of the restricted stock award.

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

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