FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN RENEFICIAL | OWNERSHIP |
|-----------|------------|-----------------|-----------|

| OIVIB APPR | OVAL |
|----------------------|-----------|
| OMB Number: | 3235-0287 |
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| hours per response: | 0.5 |

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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* Krzanich Brian M (Last) (First) (Middle) 25 MALL ROAD | | | Issuer Name and Ticker or Trading Symbol Cerence Inc. [CRNC] Date of Earliest Transaction (Month/Day/Year) 10/11/2024 | | | | | | | | (Ch | elationship of Reporting Percet all applicable) Director Officer (give title below) Chief Executive | | | 10% Owner Other (specify below) | | | | |
|--|---------|-------|--|-----------------|--|-------|--|------|----------|--|--|--|--|--|---|---|--------|---------------|----|
| SUITE 4 (Street) BURLIN (City) | IGTON M | | 1803 Zip) | | 4. If <i>i</i> | Amend | ment, | Date | of Origi | nal File | ed (Month/Da | y/Yea | r) | Line | e) Form | or Joint/Grou n filed by On n filed by Mo on | e Repo | orting Person | on |
| | | Table | I - No | on-Deriva | tive \$ | Secui | rities | Acc | quire | d, Dis | sposed of | , or | Bene | eficia | lly Own | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date | | | 2. Transacti | Execution Date, | | ate, | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) (Disposed Of (D) (Instr. 3, 4) | | |) or | 5. Am Secur Benef | ount of ities icially d Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Code | v | Amount (A) (D) | | A) or D) | Price | Trans | Transaction(s) (Instr. 3 and 4) | | | (msu. 4) | |
| Common Stock 10/11/20 | | |)24 | | A | | 1,038,062 ⁽¹⁾ A | | \$0.0 | 1,038,062 | | | D | | | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date Execution Date (Month/Day/Year) To Date (Month/Day/Year) (Month/Day/Year) | | | 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) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of Title Shares | | nstr. | 3. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y C | 0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |

Explanation of Responses:

1. Grant of Restricted Stock Units subject to the Restricted Stock Unit Agreement. Shares vest one-third on each of October 7, 2025, 2026, and 2027.

/s/ Jennifer Salinas, Attorneyin-Fact

10/15/2024

** 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.