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						
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* Salinas Jennifer		2. Date of E Requiring S (Month/Day 06/12/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol Cerence Inc. [CRNC]							
(Last) 25 MALL I	(First)	(Middle)			4. Relationship of Reporting Issuer (Check all applicable)	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 416					Director Officer (give title below)			6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person			
(Street) BURLING	TON MA	01803			EVP Chief Admi						
(City)	(State)	(Zip)									
	Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)								i. Nature of Indirect Beneficial Ownership (Instr. 5)			
1. Title of Sec	curity (Instr. 4))		Į į	2. Amount of Securities Beneficially Owned (Instr. 4)	Form: [(D) or li	Direct ndirect				
1. Title of Sec	• • • • • • • • • • • • • • • • • • • •			Į į	Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)				
	• • • • • • • • • • • • • • • • • • • •) Derivative	Beneficially Owned (Instr. 4)	Form: I (D) or li (I) (Inst	Direct ndirect r. 5)	Own			
Common St	• • • • • • • • • • • • • • • • • • • •	(e.g.		Derivative ls, warran	92,005 Securities Beneficialnts, options, converti	Form: I (D) or li (I) (Insti	Direct ndirect r. 5)	Own)			

Explanation of Responses:

/s/ Jennifer Salinas, Attorney-in-Fact

06/12/2024

** 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 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.