SEC Form 3

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* 2. Date of Event <u>Empire Capital Management, L.L.C.</u> 2. Date of Event Requiring Statement (Month/Day/Year) 12/13/2013 12/13/2013		ement	3. Issuer Name and Ticker or Trading Symbol <u>SONUS NETWORKS INC</u> [SONS]				
(Last) (First) (Middle) 1 GORHAM ISLAND SUITE 201			4. Relationship of Reporting Perse (Check all applicable) Director X Officer (give title below)		r (Mon cify 6. Inc	th/Day/Year)	ate of Original Filed /Group Filing (Check
(Street) WESTPORT CT 06880	_				x	Form filed b	y One Reporting Person y More than One erson
(City) (State) (Zip)	Table I - Nr	n-Derivat	tive Securities Beneficial	ly Owned			
1. Title of Security (Instr. 4)		:	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownershi Form: Direc or Indirect ((Instr. 5)	t (D) (Instr.		Beneficial Ownership
Common stock, \$0.001 par value			25,964,882	I	See n	otes ⁽¹⁾⁽²⁾	
			e Securities Beneficially ants, options, convertible		5)		
1. Title of Derivative Security (Instr. 4)	2. Date Exer Expiration D (Month/Day/	ate	3. Title and Amount of Securiti Underlying Derivative Security	ies 4.		5. Ownership Form: Direct (D)	. (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	ative or Indirect	
Put Option (obligation to buy)	12/13/2013	04/19/2014	Common Stock, par value \$0.001	1,048,200	3	I	See notes ⁽¹⁾⁽²⁾
Put Option (obligation to buy)	12/13/2013	07/19/2014	Common Stock, par value \$0.001	288,400	3	I	See notes ⁽¹⁾⁽²⁾
1. Name and Address of Reporting Person [*] Empire Capital Management, L.L.C	<u>.</u>						
(Last) (First) (Mi 1 GORHAM ISLAND SUITE 201	idle)	-					
(Street) WESTPORT CT 06	380	_					
(City) (State) (Zi)						
1. Name and Address of Reporting Person [*] Fine Scott A		_					
(Last) (First) (Mi C/O EMPIRE CAPITAL MANAGEMENT 1 GORHAM ISLAND, SUITE 201	ddle) LLC						
(Street) WESTPORT CT 06	380						
(City) (State) (Zi)						
1. Name and Address of Reporting Person [*] Richards Peter J							
(Last) (First) (Mi C/O EMPIRE CAPITAL MANAGEMENT	ddle) LLC						

1 GORHAM ISLAND, SUITE 201					
(Street) WESTPORT	СТ	06880			
(City)	(State)	(Zip)			

Explanation of Responses:

1. This statement is filed by (i) Empire Capital Management, L.L.C., a Delaware limited liability company ("Empire Management") with respect to the shares of Common Stock directly held by Empire Capital Partners, L.P. ("Empire Onshore"), Empire Capital Partners, Ltd. ("Empire Offshore"), Empire Capital Partners, Enhanced Master Fund, Ltd. ("Empire Enhanced Master", and together with Empire Onshore and Empire Offshore, the "Empire Investment Funds"), (ii) Mr. Scott A. Fine ("Mr. Fine") with respect to the shares of Common Stock directly held by the Empire Investment Funds and (iii) Mr. Peter J. Richards ("Mr. Richards") with respect to the shares of Common Stock directly held by the Empire Investment Funds and (iii) Mr. Peter J. Richards

2. Empire Management serves as the investment manager to, and has investment discretion over the securities held by, the Empire Investment Funds. Mr. Fine and Mr. Richards are the only managing members of Empire Management. Each of the reporting persons disclaims beneficial ownership of the shares reported herein to the extent such beneficial ownership exceeds its pecuniary interest therein. **Remarks:**

/s/ Scott A. Fine, individually
and as Managing Member of
Empire Capital Management,
LLC /s/ Peter J. Richards,
individually and as Managing
Member of Empire Capital
Management, LLC12/17/2013Scott A. Fine12/17/2013Peter J. Richards
* Signature of Reporting Person12/17/2013

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.