FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	L OWNERSHIP

UMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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).

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*  Pai Gurudutt U			2. Issuer Name <b>and</b> Ticker or Trading Symbol SONUS NETWORKS INC [ SONS ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>I di Guradutt O</u>													1 .	Director Officer	give title		10% Ov Other (s	· I	
(Last) (First) (Middle)					3. D	Date of Earliest Transaction (Month/Day/Year)								<b>–</b> X	below)	give the		below)	pcony
(Last) (First) (Middle) C/O SONUS NETWORKS, INC.					12/15/2008									Senior Vice President					
7 TECHNOLOGY PARK DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc	6. Individual or Joint/Group Filing (Check Applicable					
(Street)									Ü			,		Line)					
WESTF	ORD M	ſΑ	01886											) X	_	,		rting Persor	
															Form fil Person	Form filed by More than One Reporting Person			
(City)	(5	State)	(Zip)																
		Ta	ble I - Non	- Doriv	ativo	. 50	curitio	- A c	nuirod	Dici	nosed o	of or E	ene.	ficially	Owned				
			DIE I - NOI			_			<del>.                                     </del>	ופוט					_			1	
Date			Date			2A. Deemed Execution Date, if any (Month/Day/Year		, Transaction Dispos Code (Instr.		4. Securi Disposed	rities Acquired (A) ed Of (D) (Instr. 3, 4		A) or 3, 4 and 5	Beneficia Owned F	s Illy ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount (A)		() or ()	Price	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 12			12/15	5/2008		A		300,000 <sup>(1)</sup> A		\$0	300,000			D					
			Table II - I								osed of, onverti				Owned				
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)	Co	Transaction Code (Instr.		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 Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)		e O s Fe ally Di oi (1)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	(A)	(D)		Т				mount		(Instr. 4)	011(5)		
				Co	de V				Date Exercisab		xpiration ate	Title		umber Shares					
Employee Stock Option (right to	\$1.44	12/15/2008		A	A		300,000		(2)	1	2/15/2018	Commo Stock		00,000	\$0	300,00	00	D	

## **Explanation of Responses:**

- 1. These are restricted shares of Common Stock that vest, subject to continued employment, over a four-year period as follows: 25% will vest on the first anniversary of start date (December 15, 2008) and then, as to the remaining shares, shall vest semi-annually thereafter.
- 2. The option vests as to 25% of the shares one year from start date (December 15, 2008) and then, as to the remaining 75% of the shares, in equal monthly increments for the following 36 months.

## Remarks:

Gurudutt U. Pai

12/16/2008

\*\* 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.