FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFIC	IAL OWNER	SHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

					_			01 1110			прапу Асс									
1. Name and Address of Reporting Person* <u>Snider Jeffrey M.</u>					2. Issuer Name and Ticker or Trading Symbol SONUS NETWORKS INC [ SONS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					<u> </u>									Direc	ctor	1	)% O	wner		
				3 [	2. Data of Farlingt Transposition (Marsh/Day/Van)								$\dashv$	X	Office belov	ficer (give title Other (slow) below)				
(Last)	(FI	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/08/2012										SVI	P, General (	Counsel 8	Sec	·v
C/O SON	IUS NETW	ORKS, INC.			100/	00/00/2012										0	, General	oounser e		-9
4 TECHNOLOGY PARK DRIVE																				
. 12011	.02001.	111111211112			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable					
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(Street)	NDD 14		24000												X	Form	n filed by One	e Reporting	Pers	on
WESTFO	ORD M	Α (	01886													Form	n filed by Mor	re than One	Ren	orting
					-											Pers				
(City)	(S	ate) (	Zip)																	
		Tabl	e I - Nor	า-Deriv	ative	Se	curitie	s Ac	quired	l, Dis	posed o	f, or	Ben	efici	ally	Owne	ed			
1. Title of S	ecurity (Inst	r. 3)		2. Trans	action	ction 2A. Deemed 3. 4. Securities Acquired (							ount of	unt of 6. Ownership		7. Nature				
	, ,	,		Date (Month/I	Day/Yea		Execution Date, if any					Disposed Of (D) (Instr. 3, 4		3, 4 a			ties cially	Form: Dire		of Indirect Beneficial
(MO			(inonini			(Month/Day/Year)					Owne		d Following (i)	(I) (Instr. 4)		Ownership				
								İ		T	1	(A) or _		<u>.</u> .	Repor		ted action(s)			(Instr. 4)
									Code	· V	Amount		(A) or (D)	Price	;	(Instr. 3 and 4)				
Common Stock 06/08/				3/2012	2012		F		8,334	(1)	D	\$2.	2.38 1		59,996	D				
		Ta	ıble II - C	Derivat	ive S	ecu	rities	Acau	ired. I	Dispo	osed of,	or B	enef	ciall	v O۱	vned				
											onvertib									
1. Title of	2.	3. Transaction	3A. Deemed		4.		5. Number		6. Date Exercisable ar			and 7. Title and			8. Price o		9. Number o			11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any		Transa					Expiration Date (Month/Day/Year)			Amount of Securities		Derivative Security		derivative Securities	Owner Form:	Ownership	of Indirect Beneficial
					8)	Code (Instr. 3)		Securities		Underlying				(Inst	r. 5)   Beneficially		Direct (D)	D)	Ownership	
							Acquired			Derivative			otr 2			Owned Following	or Indirect		(Instr. 4)	
						(A) or Disposed of (D)				Security (Instr. and 4)			su. s	<b>°</b>		Reported		1. 4)		
									'							Transaction	(s)			
								(Instr. 3, 4 and 5)									(Instr. 4)			
				F			+						Amo							
							- [				Expiration		or							
									Date				Nui	mber						
					Code					Exercisable Date		Title Shares		ıres						

**Explanation of Responses:** 

1. PAYMENT OF TAX LIABILITY BY DELIVERING SECURITIES TO THE COMPANY INCIDENT TO THE VESTING OF A SECURITY.

## Remarks:

Jeffrey M. Snider

06/11/2012

\*\* 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.