INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Add Person <u>*</u> LARET M	-	orting	Statement (Month/Day/Year		3. Issuer Name and Ticker or Trading Symbol Nuance Communications, Inc. [NUAN]								
(Last)	(First)	(Middle)	06/03/2010		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)					
ONE WAYSI	IDE ROAI)											
(Street) BURLINGTON, MA 01803					(Check all applicable) Director 10% Owner Officer Other (give title below) (specify below)		6. Individual or Joint/Group						
							•	 Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City)	(State)	(Zip)	Ta	ble I - N	on-Derivati	ive Securiti	es Be	eneficially Owned					
1.Title of Securit (Instr. 4)	ty		Be	Amount of neficially (Istr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ership	rect Beneficial				
Reminder: Report owned directly or	•	te line for ea	ch class of securition	es benefici	ally SI	EC 1473 (7-02)						
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 control number.													
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Deriva (Instr. 4)	ative Securit <u>y</u>	Expir	te Exercisable and ration Date ^(Day/Year)	Securitie Derivati (Instr. 4)	and Amount of es Underlying ve Security)	4. Conversio or Exercis Price of Derivativ	se Fo D	wnership orm of erivative ecurity:	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
		Date	Expiration	1		Convitor		ins at (D)					

Exercisable

Date

Title

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

January 31,

2005

0.5

Expires:

response ...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships										
	Director	10% Owner	Officer	Other							
LARET MARK R ONE WAYSIDE ROAD BURLINGTON, MA 01803	ÂX	Â	Â	Â							
Signatures											
By: /s/ Donna Belanger For: Mar Laret	y: /s/ Donna Belanger For: Mark R. 06/04/2010 aret										
**Signature of Reporting Person	Date										
Explanation of Responses:											

Explanation of Responses:

No securities are beneficially owned

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.