FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	umber: 3235-0287					
Estimated average burden						
hours per response:	0.5					

to Section 16. Form 4 or Form 5												•	Estima	Estimated average burder				
obligations may continue. See Instruction 1(b). Filed						pursuant to Section 16(a) of the Securities Exchange Act of 1934									hours	per response:	0.5	
				1 neu	or Se	ection 3	80(h) of the	Investm	ent Co	ompany Act o	f 1940	1004						
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol <u>WORKIVA INC</u> [WK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Iskow Julie										XC	Directo	or	10%	Owner				
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)					—		Officer elow)	(give title	Other below	(specify)			
2900 UNIVERSITY BOULEVARD				09/01/2021							E	EVP & Chief Operating Officer						
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
AMES	IA	5	0010									X F	Form filed by One Reporting Person					
(City)	(St	(State) (Zip)												orm fi Person		d by More than One Reporting		
<u> </u>		Table	I - Non-F)eriva	tive S	Secu	rities Ac	nuireo		sposed of	or Be	nefici	ally O	wne	h			
4 Title of	0							3.	., 2.	4. Securities	,			Amou		6. Ownership	7. Nature	
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution Date		tion Date,	n Date, Transa Code (ransaction Disposed Of code (Instr.			4 and 5) See Be			Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	Tr	Reported Transaction(s) (Instr. 3 and 4)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Instr. 4)	
Class A Common Stock 09/01/2					021		A ⁽¹⁾		16,101 ⁽²⁾	A	\$142	.85	5 176,668		D			
		Tal	ole II - De	rivati	ve Se	ecurit	ies Aca	uired.	Disc	bosed of, o	or Ben	eficia	llv Ow	ned			·	
										convertib								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	ution Date, T		Transaction of Code (Instr. Derivative		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

Date

Exercisable

Expiration

Date

Explanation of Responses:

1. Grant of restricted stock units pursuant to the 2014 Equity Incentive Plan.

2. Vests as to 25% of the shares on each of the first and second anniversaries of the grant date, and 50% of the shares on the third anniversary of the grant date.

(A) (D)

Code v

Remarks:

<u>/s/ Brandon E. Ziegler as</u>	
attorney-in-fact for Julie	
Iskow	

Amount or Number

Shares

of

Title

09/02/2021

** 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.