FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person*

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

STATEMENT OF CHANGES IN BENEFICIAL OW

Filed pursuant to Section 16(a) of the Securities Exchange Act of 19 or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol

			OMB APPROVAL						
NERSHIP			OMB Number: Estimated average burden	3235-0287					
34		h	ours per response:	0.5					
		onship of Reporting Il applicable)	Person(s) to Issuer						
	Х	Director	10%	Owner					
		Officer (give title	below) Othe	r (specify below)					

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Herz Robert H (Last) (First) (Middle) 2900 UNIVERSITY BOULEVARD					WORKIVA INC [WK] 3. Date of Earliest Transaction (Month/Day/Year) 06/03/2021							all applicable) Director Officer (give title below)		10% Ow	
												tie below)	v) Other (specify b		pecity below)
(Street) AMES (City)	IA (State)	50	Ю10 p)	4. If Amendn	nent, Date of Origina	ıy/Year)	6. Indiv X	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
			Table I - N	lon-Derivative	Securities Ac	quired,	Disp	osed of, or Be	neficiall	y Owned					
			2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acqu (D) (Instr. 3, 4 and		Disposed Of	Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				Ownership (Instr. 4)		
Class A Common Stock		06/03/2021		A ⁽¹⁾		2,041	A	(1)	20,009		D				
Class A Common Stock										95,022		I		By Trust	
			Table II		ecurities Acqu alls, warrants,					Owned					
1. Title of Derivati	ve 2.	3. Transaction	3A. Deemed	4. Transaction	5. Number of	Exercis	able and 7. Title	and Amount	of Securities	8. Price of	9. Numb	er of 1	10.	11. Nature of	

1. Title of Derivative Security (Instr. 3)	nstr. 3) Conversion Date or Exercise Price of Derivative		Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security		Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Following Reported Transaction(s) (Instr. 4)	(Instr. 4)		

Explanation of Responses:

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

Remarks:

/s/ Brandon E. Ziegler as attorney-in-fact for Robert H. Herz 06/07/2021

Date

** Signature of Reporting Person

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.

POWER OF ATTORNEY

The undersigned hereby constitutes and appoints each of Brandon E. Ziegler and Jose A. Visaya, or either of them signing singly, and with full

(1) prepare, execute in the undersigned's name and on the undersigned's behalf, and submit to the U.S. Securities and Exchange Commis:

(2) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Workiva Inc. (the "Cr

(3) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute a

(4) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assur This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect This Power of Attorney is governed by Delaware law.

Any reproduced copy of this signed original shall be deemed to be an original counterpart of this Power of Attorney.

IN WITNESS WHEREOF, the undersigned has executed this Power of Attorney this 20th day of April, 2020.

/s/ Robert H. Herz Signature

Robert H. Herz Print Name