FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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	Sec	tion 30	(h) of	the Ir	nvestme	nt Co	mpany Act	of 1940								
1. Name and Address of Reporting Person* <u>Calkins Troy M.</u>					2. Issuer Name and Ticker or Trading Symbol WORKIVA INC [WK]										ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner						
(Last) (First) (Middle) 2900 UNIVERSITY BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/03/2020									X Officer (give title below) Other (spe below) EVP, CLO & Corp Secretary						
(Street) AMES					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Si	tate)	(Zip)													Person	Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date (Month			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			02/03						Code A ⁽¹⁾	V	Amount 25.997	(D)		(instr. 3 a		and 4)		D			
								F ⁽³⁾		4,483			46.16								
						uritic	urities Acquired, Disposed of, or Beneficially Owned								0 10	В					
	l -	T		(e.g., p	uts,	cal	ls, w	arra	nts,	optio	ns, c	converti	ole sec	uritie	es)			. 1		I	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)		n of E		e (M	 Date Exercisa expiration Date Month/Day/Yea 			7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	O Fe Illy D or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)		ate kercisabl		Expiration Date	Title	Amo or Num of Sha	ber						
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.86								02	2/25/2015	(5)	02/24/2024	Class A Common Stock	45,	080		45,080)	D		
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.83								08	3/12/2015	(5)	08/11/2024	Class A Common Stock	39,	600		39,600)	D		
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.86								03	3/27/201 5	(5)	03/26/2024	Class A Common Stock	9,9	000		9,900		D		
Employee Stock Option to Purchase Class A Common Stock ⁽⁶⁾	\$12.4								02	2/01/2018	(2)	01/31/2027	Class A Common Stock	37,	407		37,407	7	D		
Employee Stock Option to Purchase Class A Common	\$14.74								02	2/01/2017	(2)	01/31/2026	Class A Common Stock	31,	469		31,469)	D		

Explanation of Responses:

- 1. Grant of restricted stock units pursuant to the 2014 Equity Incentive Plan.
- 2. Vests in three equal annual installments commencing on the first anniversary of the grant date.
- 3. Shares delivered to the issuer for payment of withholding taxes due upon the vesting of restricted stock units previously granted.
- 4. Granted pursuant to 2009 Unit Incentive Plan.

5. Vests as to 25% of the shares on the first anniversary of the grant date and as to 6.25% of the shares at the end of each three-month period thereafter.

 $6.\ Grant$ of stock option pursuant to the 2014 Equity Incentive Plan.

Remarks:

/s/ Troy M. Calkins

02/05/2020

** 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.