FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

Check this box if no longer sul Section 16. Form 4 or Form 5 obligations may continue. See		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP									
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									
1. Name and Address of Report	ing Person*	2. Issuer Name and Ticker or Trading Symbol WORKIVA INC [WK]	5. Relation (Check all								

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

1. Name and Address of Reporting Person [*] Calkins Troy M.						2. Issuer Name and Ticker or Trading Symbol WORKIVA INC [WK]									k all applic Director	able)	g Pers	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 2900 UNIVERSITY BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/06/2017									below) below) Executive VP, Secretary & GC				
(Street) AMES IA 50010 (City) (State) (Zip)				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									 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)	(3		(Zip)	n-Deri	ivativ	ve Se	curit	ies A	Acquired,	Dis	posed	of. or B	enefic	ially	Owned				
1. Title of	1. Title of Security (Instr. 3) 2. Trans Date			nsactio			tte, 3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		or	5. Amour Securitie Beneficia Owned F	es ally Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	Code V		Amount (A) or (D) P		ice	Reported Transaction(s) (Instr. 3 and 4)					
Class A G	Class A Common Stock		02/0	06/2017				F ⁽¹⁾		9,14	40 D \$		12.85	5 141,697		97 D			
									cquired, D Its, optior						Owned				
Derivative Conversion Dat		3. Transaction Date (Month/Day/Year) SA. Deemed Execution D if any (Month/Day/		d Date,	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		unt	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Sha	oer					
Employee Stock Option to Purchase Class A Common Stock ⁽²⁾	\$12.4								02/01/2018 ⁽	³⁾ 0:	1/31/2027	Class A Common Stock	37,4	407		37,40	17	D	
Employee Stock Option to Purchase Class A Common Stock ⁽²⁾	\$14.74								02/01/2017 ⁽⁾	3) 0:	1/31/2026	Class A Common Stock	31,4	169		31,46	9	D	
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.83								08/12/2015 ⁽³	5) 08	3/11/2024	Class A Common Stock	39,6	500		39,60	0	D	
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.86								03/27/2015 ⁽⁾	5) 03	3/26/2024	Class A Common Stock	9,9	00		9,900	D	D	
Employee Stock Option to Purchase Class A Common Stock ⁽⁴⁾	\$15.86								02/25/2015 ^{(;}	5) 02	2/24/2024	Class A Common Stock	108,	900		108,90	00	D	

Explanation of Responses:

1. Shares delivered to the issuer for the payment of witholding taxes due upon the vesting of restricted stock previously granted.

2. Grant of stock option pursuant to the 2014 Equity Incentive Plan.

3. Vests in three equal annual installments commencing on the first anniversary of the grant date.

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.

Remarks:

<u>/s/ Troy M. Calkins</u>

** Signature of Reporting Person

02/07/2017

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.