FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	APPROVAL	
CHAIR	APPRUMAL	

OMB Number:	3235-0287
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Budde Gerald B. (Last) (First) (Middle) C/O WORKHORSE GROUP INC.			2. Issuer Name and Ticker or Trading Symbol Workhorse Group Inc. [WKHS]		tionship of Reporting Person(s) all applicable) Director	(s) to Issuer	
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/02/2023		Officer (give title below)	Other (specify below)	
			4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting F			
SHARONVILLE	ОН	45241	Rule 10b5-1(c) Transaction Indication				
(City)	(State)	(Zip)	Check this box to indicate that a transaction was made pursuant to a contra affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.	ct, instruc	tion or written plan that is intended	to satisfy the	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and Code (Instr. 8)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock, \$0.001 par value per share	05/02/2023		D		24,752(1)	D	\$0	156,077	D	
Common Stock, \$0.001 par value per share								119,692	I	See Footnote ⁽²⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative		6. Date Exerc Expiration Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

1. On February 22, 2023, Workhorse Group Inc. (the "Company") granted to the reporting person 49,505 shares of restricted stock under an Award Agreement, which were scheduled to vest based in part based on the reporting person's continued service as a director of the Company, or pro rata in the event that the reporting person ceased being a director of the Company by reason of death, disability or not standing for re-election. The reporting person's service as a director ended on May 2, 2023, and pursuant to the Award Agreement, the reporting person forfeited half of the awarded shares to the Company.

2. Securities held by the Gerald B. Budde Living Trust dated September 8, 2004. Gerald Budde is the trustee of such trust.

Remarks:

/s/ Arthur McMahon, attorney-infact for Gerald B. Budde 05/04/2023

** 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.