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

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

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#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Respons	es)											
1. Name and Address of Chess Raymond Jo		2. Issuer Name and Workhorse Grouj		-	· •		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) C/O WORKHORS COMMERCE DR	· · · · · · · · · · · · · · · · · · ·	100	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2019					Officer (give title below) Oth	er (specify below	v)		
(Street) LOVELAND, OH 45140			4. If Amendment, Da	te Original I	Filed(N	Month/Day/Ye	ar)	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)	(State)	(Zip)	Table I - Non-Derivative Securities Acq						uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		(Instr. 8)		4. Securit (A) or Dis (Instr. 3, 4	sposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		12/17/2019		F		5,147 (1)	D	\$ 2.72	149,289	D		
Common Stock		12/17/2019		М		10,000 (1)	А	\$ 1.4	154,436	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in SEC 1474 (9-02) this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
Security	Conversion or Exercise		Execution Date, if any	Code	tion	of D Secu	irities	Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		Derivative Security	Securities	Ownership Form of	Beneficial
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		or D of (I	r. 3, 4,						Owned Following Reported Transaction(s)	Direct (D) or Indirect (I)	(Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Options	\$ 1.40	12/17/2019		М			10,000	12/19/2014	12/19/2019	Common Stock	10,000.00	\$ 0	0	D	
Stock Options	\$ 7.21							08/16/2016	08/16/2021	Common Stock	10,000.00		10,000	D	
Stock Options	\$ 4.99							02/03/2016	02/01/2021	Common Stock	10,000.00		10,000	D	
Stock Options	\$ 1.75							08/13/2015	08/11/2020	Common Stock	10,000.00		10,000	D	

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Chess Raymond Joseph C/O WORKHORSE GROUP INC., 100 COMMERCE DRIVE LOVELAND, OH 45140	Х						

# Signatures

/s/Raymond Chess	12/19/2019
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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).
- This Form is being filed to report the exercise of a stock option pursuant to which the Reporting Person received an aggregate of 10,000 shares by means of a cashless exercise. A cashless (1) exercise is a method of exercising a stock option in which the option holder pays the exercise price to the Company using shares of common stock the Reporting Person would have received pursuant to the option exercise. As a result of this cashless exercise, the Reporting Person, on a net basis, acquired ownership of a net amount of 4,853 shares of common stock.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.