## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

#### 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 Ty	pe Response	s)														
1. Name and Address of Reporting Person* Samuels H. Benjamin				2. Issuer Name and Ticker or Trading Symbol Workhorse Group Inc. [WKHS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) C/O WORKHORSE GROUP INC.,, 100 COMMERCE DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/25/2021							Officer (give title below) Other (specify below)					
(Street) LOVELAND, OH 45140				4. If Amendment, Date 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) (State) (Zip)				Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned						
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)		Date, if			v	(A) or Disposed of (Instr. 3, 4 and 5)  (A) or		of (D)	(D) Beneficially Owned Followin Reported Transaction(s) (Instr. 3 and 4)		ollowing	6. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)	
Common Stock, \$0.001 par value per share 02/25/2021						A	•	3,966 (1)	<b>-</b>	\$ 15.13	397,669	)		D		
Common Stock, \$0.001 par value per share												445,421		I	See Footnote	
Common Stock, \$0.001 par value per share											220,966		I	See Footnote		
Reminder:	Report on a s	separate line fo	or each class of secur	Derivative	Securit	ies Ac	equire	Pers cont the f	ons what in the constant of th	no resp n this f splays	orm are a curre eneficial	not requesting ntly valid	ction of inf uired to res OMB cont	spond unle	ess	C 1474 (9-02)
1 77'41 . C	2	2.77		e.g., puts, o			ts, op					·.1 1	0 D : C	0.31 1	C 10	11.37.
Derivative Security			vative rities ired rosed )	6. Date Exercisable and Expiration Date (Month/Day/Year)		Ame Und Seco	itle and ount of erlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	Beneficial Ownershi (Instr. 4)  (D) rect					
				Cod	e V	(A)		Date Exer	cisable	Expirati Date	Title	Amount or Number of Shares				

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Samuels H. Benjamin C/O WORKHORSE GROUP INC., 100 COMMERCE DRIVE LOVELAND, OH 45140	X					

#### **Signatures**

/s/ H. Benjamin Samuels	03/01/2021			
**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).
- (1) Represents shares of common stock granted under a Restricted Stock Award Agreement vesting on the six month anniversary of the grant.
- (2) Mr. Samuels is the trustee of the Samuels 2012 Children's Trust UAD 10/28/12.
- (3) Marci Rosenberg is the trustee of the Marci Rosenberg 2012 Family Trust. Mrs. Rosenberg is the wife of Mr. Samuels.

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.