FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machington	D C	20540
Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average burden										
hours ner 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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Winters Christopher</u>				2. Issuer Name and Ticker or Trading Symbol APPIAN CORP [APPN]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(Fi PIAN CORI	rst) ((Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/31/2023								X Officer (give title Other (specify below) General Counsel				
7950 JONES BRANCH DRIVE					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MCLEA	N VA	A	22102												filed by Mor	e Reporting P re than One F		
(City)	(Si	rate) ((Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ended to				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,			Code (In	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			Benefic Owned	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect t Beneficial Ownership			
								Code	v	Amount	(A) or (D) Price		Reporte Transac (Instr. 3	tion(s)		(Instr. 4)		
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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date,	1. Fransaction Code (Instr. 3)		n of E		6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration ate	Title	Amount or Number of Shares					
Restricted Stock Unit	(1)	10/31/2023			A		0		(2)		(2)	Class A Common Stock	6,364	\$0	6,364	D		
Restricted Stock Unit	(1)	10/31/2023			A		0		(3)		(3)	Class A Common Stock	2,966	\$0	2,966	D		

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of Issuer's Class A Common Stock (or its cash equivalent, at the discretion of the Issuer).
- 2. The RSUs will vest in four (4) equal annual installments commencing on the one-year anniversary of November 5, 2023, provided that the Reporting Person has provided continuous service to the Issuer through the vesting date.
- 3. The RSUs will vest on November 5, 2024, provided that the Reporting Person has provided continuous service to the Issuer through the vesting date.

Remarks:

/s/ Angela Patterson, Attorneyin-Fact 11/02/2023

** 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.