FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
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0.5

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

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 an		2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
Kramer Robert Charles						APPIAN CORP [APPN]								- 1"	X	Direc	,	10%	Owner	
,													er (give title		er (specify					
(Last)	3. D	3. Date of Earliest Transaction (Month/Day/Year)									X	belov		belo						
(Last) (First) (Middle) C/O APPIAN CORPORATION						08/07/2019											General Manager			
7950 JONES BRANCH DRIVE																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)					
(Street) TYSONS	S VA		22102												X	Form	n filed by One	Reporting Po	erson	
1 1 SONS) VF	1 2	22102													Form filed by More than One Reporting				
																Person				
(City)	(St	ate) (Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of S	ecurity (Inst	r. 3)		2. Transac	ction					3. 4. Securities Acquired (A) o							ount of	6. Ownership		
Date (Month/Day					ay/Year)	Execution Date, //Year) if any			Transaction Disposed Of (D) (Instr. 3, Code (Instr.			3, 4 an			ities icially	Form: Direct (D) or Indirect	of Indirect t Beneficial			
ľ					(Mo		(Month/Day/Year)		8)				Owned Report			(I) (Instr. 4)	Ownership (Instr. 4)			
		Code	v	Amount					(A)	o) or Price		Transactio		action(s)		(,				
						-				- `		· ·		_						
Class A C	2019	:019		S ⁽¹⁾		48,000		D	\$40.76(2)		6	6,363	D							
		Ta	ble II -	Derivat	ive S	ecuri	ities	Acan	ired. [Disn	osed of,	or Be	ene	ficiall	v Ov	vned				
											onvertib									
1. Title of	2.	3. Transaction	3A. Deer		4.				6. Date Exercis			7. Title and			8. Price of		9. Number o		11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any	on Date,	Transa Code (of Derivative Securities Acquired		Expiration Date Amount (Month/Day/Year) Securiti						Deriv Secu	ative rity	derivative Securities	Ownershi Form:	p of Indirect Beneficial	
(Instr. 3)	Price of Derivative		(Month/E	Day/Year)	8)				(Underlying Derivative			(Instr. 5)		Beneficially Owned	Direct (D) or Indirect		
	Security					(A) or		Security (Instrand 4)				3		Following	(I) (Instr.					
						Disposed of (D)							Reported Transaction((s)					
							(Instr. 3, 4 and 5)								(Instr. 4)					
									\vdash	Δ.	nount	1								
													or							
								Date		Expiration		Nu of	ımber							
					Code	V	(A)	(D)	Exercis	able	Date	Title	S	nares				- 1		

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on December 10, 2018.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$40.75 to \$40.77, inclusive. The Reporting Person undertakes to provide to Appian Corporation, any security holder of Appian Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (2).

Remarks:

/s/ Angela Patterson, Attorneyin-Fact ** Signature of Reporting Person

08/09/2019

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.