FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

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

St			Statemen	Date of Event Requiring tattement (Month/Day/Year) 1/01/2023 3. Issuer Name and Ticker or Trading Symbol APPIAN CORP [APPN]								
(Last) 7950 JONES BRA (Street)	(First) NCH DRIVE	(Middle)	_				nship of Reporting Person(s) to Iss I applicable) Director Officer (give title below)	ssuer 10% Owner Other (specify below)		If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line) Y Form filed by One Reporting Person		
MCLEAN	VA	22102									,	fore than One Reporting Person
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)				2. Amount Owned (Ins		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Class A Common S	Stock						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)			ate	Security (Instr. 4) Convers or Exerc			cise or Indirect (I)		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
		Date Exercisable		Expiration Date	Title		Amount or Number of Shares	Price of Derivati Security	ve	(Instr. 5)		

Explanation of Responses:

Remarks:

/s/ Angela Patterson, Attorney-in-Fact 01/03/2023

** 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 5 (b)(v).

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.

^{**} 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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Christopher Winters, Angela Patterson, Jeffrey Ramsay

- execute for and on behalf of the undersigned, in the undersigned's capacity as an officer, director or beneficial owner of more than 10% do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to execute such Forms 3, 4, or ! take any other action of any nature whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be a
- (3)

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever This Power of Attorney shall remain in full force and effect until the earliest to occur of (a) the undersigned is no longer required to file The undersigned has caused this Power of Attorney to be executed as of November 1, 2022.

/s/ Shirley Edwards Shirley Edwards