FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response	e: 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*  Kilberg Bobbie G					2. Issuer Name <b>and</b> Ticker or Trading Symbol APPIAN CORP [ APPN ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last)	(Fir	rst) (M	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024										er (give title		Other (: below)		
C/O APPIAN CORPORATION 7950 JONES BRANCH DRIVE					4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. In Line	<i>'</i>						
(Street) MCLEA	N VA	. 2	2102		Dul											Form filed by More than One Reporting Person				
(City) (State) (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.														
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	lly Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date		Date,	Transaction Disposed Code (Instr. 5)			ies Acquired (A) o Of (D) (Instr. 3, 4			Benefic Owned	ies ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or	Price		ed ction(s) 3 and 4)	ion(s)		(Instr. 4)	
Class A Common Stock 07/01/2						2024					1,012	I	A	\$ <mark>0</mark>	1	,012	D			
Class A Common Stock														9	9,523			By trust <sup>(2)</sup>		
		Tal									osed of, o				/ Owne	d				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of	iired r osed ) r. 3, 4	6. Date I Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Expiration o		or Num of Shar	ber								

## **Explanation of Responses:**

- 1. These shares were granted under the Issuer's 2017 Equity Incentive Plan pursuant to the Issuer's Non-Employee Director Compensation Policy, as amended and approved by the Board of Directors on
- 2. 1,246 shares are held by the Barbara Greene Kilberg Living Trust U/A dated July 1, 1998, of which William and Barbara Kilberg are the co-trustees; 1,246 shares held by the Kilberg Family Trust U/A dated October 13, 2021, of which Barbara Kilberg is the trustee; and 7,031 shares held by William & Barbara Kilberg Trustees of the William Kilberg Trust dated July 1, 1998 and Barbara & William Kilberg Trustees of the Barbara Kilberg Trust dated July 1, 1998, Tenants in Common ("WB Trust"). Includes 782 shares previously owned directly that were contributed to the WB Trust on 5/1/2024.

## Remarks:

/s/ Angela Patterson, Attorney-in-Fact

07/01/2024

\*\* 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.