Workhorse Group Inc. Form 4 December 23, 2015

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

OMB APPROVAL

OMB 3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading LUKENS JOSEPH THEODORE JR Issuer Symbol Workhorse Group Inc. [WKHS] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) _X__ 10% Owner Director _ Other (specify Officer (give title C/O WORKHORSE GROUP 12/09/2015 below) INC.,, 100 COMMERCE DRIVE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

LOVELAND OH 45140

SHARE

LOVELAND, On 45140					Person	-				
	(City)	(State) (Z	Zip) Table	I - Non-D	erivative S	ecuriti	es Acc	quired, Disposed	l of, or Benef	icially Owned
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securiti (A) or Dis (D) (Instr. 3, 4	posed of and 5) (A) or	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	COMMON STOCK, \$0.001 PAR VALUE PER SHARE	12/09/2015		C	25,000	` '		1,229,260	D	
	COMMON STOCK, \$0.001 PAR VALUE PER							154,870	I	The Joe & Kim Lukens Foundation

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			US Trust
COMMON			Company of
STOCK,			Delaware
\$0.001 PAR	2,697,147	I	Administrative
VALUE	2,097,147		Trustee of the
PER			Joe & Kim
SHARE			Lukens
			Dynasty Trust

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474 (9-02)

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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securiti (Instr. 3 and 4)	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An Nu Sha
COMMON STOCK PURCHASE WARRANT	\$ 5.28				11/25/2015	11/25/2020	COMMON STOCK, PAR VALUE \$0.001	57
6% CONVERTIBLE PROMISSORY NOTE	\$ 3.5				11/25/2015	11/25/2017	COMMON STOCK, PAR VALUE \$0.001	57
COMMON STOCK PURCHASE WARRANT	\$ 1.5				05/23/2014	05/22/2017	COMMON STOCK, PAR VALUE \$0.001	90
COMMON STOCK PURCHASE	\$ 1.5				03/18/2014	03/17/2017	COMMON STOCK, PAR	60

WARRANT			VALUE \$0.001
COMMON STOCK PURCHASE WARRANT	\$ 4	03/13/2013 03/12/2016	COMMON STOCK, PAR 2 VALUE \$0.001

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LUKENS JOSEPH THEODORE JR C/O WORKHORSE GROUP INC., 100 COMMERCE DRIVE LOVELAND, OH 45140		X					

Signatures

/s/ Joseph T.
Lukens

_*Signature of Reporting Person

Application 12/23/2015

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).

Remarks:

All prices and amounts are revised to reflect the 10:1 reverse split effective December 11, 2015.

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.

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