FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average	burden					
hours per response	0.5					

longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person *- Ritter Ira E.				2. Issuer Name and Ticker or Trading Symbol SCWorx Corp. [WORX]						mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner				
(Last) (First) (Middle) 590 MADISON AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 11/26/2019						y/Year)	_	Officer (give	title below)	Other	(specify below)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year) 11/29/2019						h/Day/Year)	_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
	ORK, NY													toporting reison		
(Cit	y)	(State)	(Zip)			T	able	I - Non-De	riva	ntive Securities	Acquired	Disposed	of, or Benef	ficially Owned		
(Instr. 3) Date			2. Transaction Date (Month/Day/Year				(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		C(D) Own Tran	(D) Owned Followi Transaction(s)		l C F	wnership of orm: Be	Beneficial
			(Month/Day		ay/Year)	Co	ode V	Am	(A) or ount (D)	Price	er. 3 and 4)		o (1	Indirect (In	wnership nstr. 4)	
			Table II					a curr quired, Disp	ent pose	rm are not re ly valid OMB ed of, or Benef vertible securit	control n	umber.	unless the	form display	rs	
1. Title of Derivative Security (Instr. 3)	Conversion	e (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction Code		5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial	
				Code	v	(A)	(D)	Date Exercisable	e	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 2.64	11/26/2019		A		50,000		11/26/20	19	11/26/2029	Commo Stock	n 50,000	\$ 0	50,000	D	

Reporting Owners

B 4 0 V /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Ritter Ira E. 590 MADISON AVENUE NEW YORK, NY 10022	X					

Signatures

/s/ Ira E. Ritter	12/16/2019
**Signature of Reporting Person	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).

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.