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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

	pe Response														
1. Name and Address of Reporting Person* Christie Robert Steven				2. Issuer Name and Ticker or Trading Symbol SCWorx Corp. [WORX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director				
(Last) (First) (Middle) 590 MADISON AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 11/26/2019							Officer (give	title below)	Oth	er (specify belo	v)
NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_1	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Cir		(State)	(Zip)	Table I - Non-Derivative Securities Acq				s Acquired,	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execut any	2A. Deemed Execution Date, any (Month/Day/Yea	f Code (Inst	-	(A) or Disposed		f (D) Own Tran	5. Amount of Securities B Owned Following Reporte Transaction(s) (Instr. 3 and 4)		d	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				(1110110	, 2 u j		ode V	Amount	(A) or (D)	Price	(Histi: 5 tiliti 1)		or (I)	or Indirect (I) (Instr. 4)	- · · · · · ·
Reminder:	Report on a	separate line for each	a class of securities b	peneficial	lly owned	lirectly	Perso in this	ns who	are not re		respond ι		on contain form displa		474 (9-02)
Reminder:	Report on a	separate line for each	class of securities b	eneficial	lly owned	lirectly									
1. Title of Derivative	2. Conversion	3. Transaction Date	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., pu 4. Transact	tive Secur uts, calls, v 5. Nu tion of De	ities Ac	Persoin this a curred, Dists, options, 6. Date Experimental Experiment	posed of converti- ercisable	are not re ralid OMB f, or Benef ble securit and	cquired to a control nutricially Own ties) 7. Title and of Underly	respond uumber. ned	8. Price of Derivative	9. Number of Derivative	of 10. Ownersl	11. Natu
1. Title of	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., pu 4. Transact Code	tive Secur uts, calls, v 5. Nu tion of De Secur Acqu	mber rivative ities red (A) posed	Persoin this a curred, Dists, options, 6. Date Expiration (Month/Distance)	posed of converti- ercisable	are not re ralid OMB f, or Benef ble securit and	equired to a control nutricially Own ties)	respond uumber. ned d Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Ownersl Form of Derivati Security Direct (1 or Indirects) (I)	11. Nature of Indirection of Seneral (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., pu 4. Transact Code	tive Secur uts, calls, v 5. Nu tion of De Secur Acqu or Di of (D (Instr	mber rivative ities red (A) posed	Persoin this a curred, Dists, options, 6. Date Ex Expiration (Month/District Control of the Exercisable Exercisable of the Exer	posed of converti ercisable Date ay/Year)	are not realid OMB f, or Benefible securion e and	control notices) 7. Title and of Underly Securities	respond uumber. ned d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Nature of Indirection of Seneral (Instr. 4

Reporting Owners

P (0 N /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Christie Robert Steven 590 MADISON AVENUE NEW YORK, NY 10022	X				

Signatures

/s/ Robert Christie	11/29/2019
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.