FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
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nours 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).

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 Type Respons	es)												
Name and Address of Reporting Person * Horowitz Steven Ross			2. Issuer Name and Ticker or Trading Symbol SCWorx Corp. [WORX]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner				
590 MADISON A	(First) VE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/11/2021				Office	r (give title belo	ow)	Other (specify b	elow)		
NEW YORK, NY	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu				Acqui	uired, Disposed of, or Beneficially Owned					
(Instr. 3)		2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	(4	(A) or Disposed of (Instr. 3, 4 and 5)		Beneficia Reported		ant of Securities ally Owned Following d Transaction(s)		Ownership Form:	Beneficial
			(Month/Day/Year	Code	VA	Amount	(A) or (D)	Price	or I		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Restricted Stock U	nits	08/11/2021		A	4	1,667	A	\$ 0	41,667 (1)			D	
Reminder: Report on a		r each class of secur	ities beneficially or	wned direc	Person contair	ns who	respon this forr	n are	not requ		spond unle	ss	1474 (9-02)
		Table II - l	Derivative Securit	ies Acquir	Person contair the for	ns who ned in m disp	respon this form plays a co	n are urrer ficiall	not requ itly valid	uired to res		ss	1474 (9-02)
	3. Transaction	Table II - I a 3A. Deemed Execution Da any	Derivative Securit e.g., puts, calls, wate, if Transaction Code Year) (Instr. 8)	ies Acquir arrants, op 5.	Person contain the form the form the form of the form	ns who ned in m disp cosed of convertil Exercis piration n/Day/Y	o respon this forr plays a co f, or Bene ble secur sable i Date	n are urrer ficiall ities) 7. Ti Amo Unde Secu (Instr 4)	not required the and the and the and the erlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Naturof Indire Benefici (Instr. 4)

Reporting Owners

D 4 0 V /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Horowitz Steven Ross 590 MADISON AVE NEW YORK, NY 10022	X					

Signatures

/s/ Steven Horowitz	10/04/2021
**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).
- (1) These Restricted stock Units ("RSUs") were granted for reporting person as compensation for acting as a Director. They vest in monthly installments, and shall vest in full on $\frac{12}{31/2021}$

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.