FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

Name and Address of Reporting Person* Marie Olivier						2. Issuer Name and Ticker or Trading Symbol UPWORK, INC [UPWK]								Check	all app		ıg Pei	10% Ov	wner	
(Last)	(Last) (First) (Middle) C/O UPWORK INC.						3. Date of Earliest Transaction (Month/Day/Year) 11/14/2023								X Officer (give title below) Other (specify below) Chief Accounting Officer					
475 BRANNAN STREET, SUITE 430						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN FRANCISCO CA 94107				7		Dula 10h5 1(a) Transportion Indication									X Form filed by One Reporting Person 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.														
			1 - 1	Non-Deriva				_			-	-		ially						
				2. Transaction Date (Month/Day/Yo	ear) if	Executio		e, T	3. Transaction Code (Instr. 8)		4. Securities Acq Disposed Of (D) (Secur Benef	rities eficially ed Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								c		v	Amount	(A) or (D)	Price	Transaction((Instr. 3 and		action(s)	(1113	4,	(113411 4)	
Common Stock 11/					23				S ⁽¹⁾		1,023	D	\$14.2	.23		7,443 ⁽²⁾		D		
Common Stock 11/16/20					23		5		S ⁽¹⁾		3,105	D	\$14.090	906 ⁽³⁾		4,338		D		
		Tal	ole	II - Derivati (e.g., pu						,	posed of , converti	,		•	Owne	d				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			cution Date, ny	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp	ate Exe iration nth/Day		Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exe	e rcisabl	Expiration e Date	n Title	Amount or Number of Shares	r								

Explanation of Responses:

- $1.\ This\ transaction\ was\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ plan\ adopted\ by\ the\ Reporting\ Person\ on\ May\ 30,\ 2023.$
- 2. Includes 3,105 shares acquired under the Issuer's employee stock purchase plan on November 14, 2023.
- 3. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$13.91 to \$14.39 per share, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon written request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Jacob McQuown, Attorney-11/16/2023

** 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.