Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting I	ssuer										
1 Issuer's name		2 Issuer's employer identification number (EIN)									
				N/A							
Wearable Devices Ltd. 3 Name of contact for add	litional information	4 Tolophone	No of contact	5 Email address of contact							
3 Name of contact for auc	illionai imormation	4 releptione	No. of contact	5 Email address of contact							
Alon Mualem, CFO				alonmualem@wearabledevices.co.il							
6 Number and street (or P	.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact									
5 Ha-Tnufa Street 8 Date of action		Yokne'am Illit, 2066736, Israel									
b Bate of action		'									
10/10/2024		Reverse S	Reverse Share Split								
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)							
1407000400			W. DO								
M97838128 Part II Organization	nal Action Attac		WLDS statements if needed	See back of form for additional questions							
Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action On October 10, 2024, Wearable Devices Ltd. (the "Company") affected a 1-for-20 reverse share split (the "Reverse")											
				per share (the "Ordinary Shares"), and the Company's							
				ch every twenty Ordinary Shares (the "Old Ordinary Shares")							
				ry twenty Warrants (the "Old Warrants") were consolidated							
				Shares or New Warrants resulting from the Reverse Share							
				w Warrant, as applicable. Company Shareholders							
- '			•	ompany with the U.S. Securities and Exchange Commission							
				· · ·							
				nsequences of the Reverse Split, including the applicability							
and effect of all U.S. federa	ai, State and local a	na ioreign (a)	K laws.								
_											
45 December the acceptitest	ive affect of the over	minational acti		activity in the hands of a LLC towns you as an adjustment you							
•	•			ecurity in the hands of a U.S. taxpayer as an adjustment per							
				d to qualify as a "reorganization" within the meaning). The aggregate adjusted tax basis of the New Ordinary							
			· · · · · · · · · · · · · · · · · · ·	3							
				olit, should be equal to the aggregate adjusted							
				exchanges therefor. Company							
				different prices must allocate such adjusted tax basis							
· · · · · · · · · · · · · · · · · · ·				rendered. The Reverse Share Split had no effect							
				rerse Share Split and will be equal to such Company							
shareholder's basis in the	Old Ordinary Shar	es and Old Wa	arrants, as applicable,	surrendered in the Reverse Share Split.							
	•			alculation, such as the market values of securities and the							
				ares and New Warrants received by a shareholder							
				Old Ordinary Shares and Old Warrants, as applicable							
				Varrants at different times or at different prices must allocate							
such adjusted tax basis w	ith respect to each	block of Old (Ordinary Shares or Old	d Warrants, as applicable, surrended.							
Company shareholders should consult their own tax advisors regarding the appropriate method for determining their specific											
tax treatment of the Reverse Share Split (including but not limited to the computation of gain and tax basis).											

Part	Ш	Organizational Action	1 (continued)						
		applicable Internal Revenue							354,
		3, 1001, 1221, and 1223 are	the applicabl	e Code sections up	on which the tax tro	eatment o	f the Reve	rse Split	
is base	d.								
18 Ca	an any ry Sh a	resulting loss be recognize ares or New Warrants in th	ed? ► <u>Compa</u> ne Reverse Sp	ny shareholders ge lit.	nerally cannot reco	gnize any	gain or lo	oss upon reco	eipt of New
19 Pr	rovide	any other information neces	ssary to impler	ment the adjustment,	such as the reportal	ole tax yea	r ► The ba	asis adjustme	ents resulting
		verse Share Split are taken							
occurre	ed (e.g	ı., 2024 for calendar year ta	axpayers).						
Sign		r penalties of perjury, I declare , it is true, correct, and complet							
Here	Signa	ature ▶	Wegszite Devices LTD. 515056117 .p.n			Date►			
			-						
	Print	your name ► Alon Mualem		1-			Chief Fina	ncial Officer	
Paid Prepa	arer	Print/Type preparer's name		Preparer's signature		Date		Check if self-employed	PTIN
Use C		Firm's name ►						Firm's EIN ▶	
Joe Jiny		Firm's address ▶						Phone no	

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054