## 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	Issuer				
1 Issuer's name		2 Issuer's employer identification number (EIN)			
The Options Clearing Corp	ooration			36-2756407	
3 Name of contact for ad		5 Email address of contact			
Thomas Crider		212 222 4200	Form 9027 @th o acc occur		
6 Number and street (or F	Ω hox if mail is not	delivered to	312.322.6200 street address) of contact	Form8937@theocc.com 7 City, town, or post office, state, and ZIP code of contact	
o mannot and one of (or )	.o. box ii maii io nov	001170100 10 1	orioot address, or correct	7 Sity tomi, S. post office, state, and 211 dode of contact	
125 S. Franklin Street Suit	e 1200	Chicago, IL 60606			
8 Date of action		9 Class	sification and description		
September 17, 2024		Options	on shares of Deckers Outdoo	or Corporation	
10 CUSIP number	11 Serial number(s		12 Ticker symbol	13 Account number(s)	
Down II. Organizati	All serie		DECK		
		····		back of form for additional questions.  against which shareholders' ownership is measured for	
-				orporation (DECK) is replaced by 6	
contracts to reflect a 6 for				biporation (bedity is replaced by o	
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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				v in the hands of a U.S. taxpayer as an adjustment per ct is allocated to each of the 6 replacement contracts.	
			( 0.001)		
	•			ion, such as the market values of securities and the ss the replacement contracts.	
			100.1000		
romano de la compansa					
				The state of the s	
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Part	Ш	Organizational Action (continued)						
17 Li	ist the	applicable Internal Revenue Code section(s) and	subsection(s) upon which the tax	reatment is based	Section 1012 (a)			
ī								
		·						
18 C	an an	y resulting loss be recognized? ► No.						
<b>19</b> Pr	rovide	any other information necessary to implement th	e adjustment, such as the reportat	ole tax year ►				
	Unde	or penalties of perjury, I declare that I have examined the	is return, including accompanying sche	dules and statements	and to the hest of my knowledge and			
	belief	, it is true, correct, and complete. Declaration of prepare	r (other than officer) is based on all info	rmation of which prepa	arer has any knowledge.			
Sign								
Sign Here Signature Mounts Circ Date 10/15/2024								
	0.9	70000			7,2027			
_	Print	your name▶ Thomas Crider		Title ► Executive	Director			
Paid		Print/Type preparer's name Preparer	er's signature	Date	Check if PTIN			
Prepa	arer				self-employed			
Use C		Firm's name ▶			Firm's EIN ▶			
		Firm's address ▶			Phone no.			
Send Fo	orm 89	37 (including accompanying statements) to: Dep	artment of the Treasury, Internal Re	evenue Service, Ogo	den, UT 84201-0054			