FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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OMB Number:	3235-0287
Estimated average burden	
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#### 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

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

1. Name and Address of Reporting Person* Mullins Kevin W			2. Issuer Name and Ticker or Trading Symbol WRAP TECHNOLOGIES, INC. [ WRAP ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O WRAP TECHNOLOGIES, INC. 1817 W 4TH STREET  (Street) TEMPE AZ. 85281		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/30/2023	X	Director Officer (give title below) CHIEF EXECUTIVE O	10% Owner Other (specify below) DFFICER			
		85281	4. If Amendment, Date of Original Filed (Month/Day/Year)	ck Applicable Line) Person Reporting Person					
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contra affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.	ct, instructi	on or written plan that is intended t	to satisfy the			

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Oate, Transaction Code (Instr.		4. Securities Ad Of (D) (Instr. 3,		) or Disposed	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	05/30/2023		P		20,000	A	\$1.0719(1)	246,151	D		

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

- 1	1. Title of	2.	3. Transaction	3A. Deemed							7. Title and Amount of				10.	11. Nature	ı
- 1	Derivative	Conversion	Date	Execution Date,	Transaction I		Derivative		Expiration Date		Securities Underlying		Derivative	derivative	Ownership	of Indirect	L
- 1	Security (Instr. 3)	or Exercise	(Month/Day/Year)	if any	Code (Instr.		Securities		(Month/Day/Year)		Derivative Security		Security	Securities	Form:	Beneficial	L
- 1		Price of		(Month/Day/Year)	8)		Acquire	ed (A)			(Instr. 3 and	4)	(Instr. 5)	Beneficially	Direct (D)	Ownership	L
- 1		Derivative		`	l		or Disp	osed of			Ι`	•	` ′	Owned	or Indirect	(Instr. 4)	L
- 1		Security			(D) (Instr. 3, 4 and 5)		(D) (Instr. 3. 4					Following	(I) (Instr. 4)	[` ' '	L		
- 1							- 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					Reported	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		L		
- 1							uu 0,						l	Transaction(s)			L
- 1						l						Amount		(Instr. 4)			L
- 1						l						or		(111501.4)			1
- 1						l			Date	Expiration		Number					L
- 1					Code	l۷	(A)	(D)	Exercisable	Date	Title	of Shares					L
L					Code		(~)	(6)	LACICISADIC	Date	''''	oi Silales					1

#### **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.04 to \$1.0799, 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 request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote 1 to this Form 4.

/s/ Chris DeAlmeida, Attorney-in-Fact 06/01/2023

\*\* 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.