FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF	CHANGES	IN BE	NEFICIAI	L OWNER	SHIP
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OMB APPROVAL								
OMB Number: 3235-0								
Estimated average burden								
houre per reenonee.	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Adler Eric				2. Issuer Name and Ticker or Trading Symbol Lexeo Therapeutics, Inc. [LXEO]							k all application	ionship of Reporting all applicable) Director		10% Ow	/ner				
(Last)	,	irst) APEUTICS, INC	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024 X Officer (give title below) Chief M								give title hief Med	lical (Other (s below) Officer	pecify		
345 PARK AVENUE SOUTH, FLOOR 6					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW Y	ORK N	Y	10010									X	Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		R	Rule 10b5-1(c) Transaction Indication													
									cate that a tr e conditions						, instruction o	or written pl	an that	is intended to	satisfy
		Та	ble I - Nor	n-Der	ivativ	ve S	ecurities	s Ac	quired,	Dis	posed c	of, or Be	enefic	ially	Owned				
Date			nsactio h/Day/\	action 2A. Deemed Execution Date, if any (Month/Day/Yea		Date,	r, Transaction Disposed C		ties Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amoun Securities Beneficia Owned Fo	s Form Illy (D) o ollowing (I) (Ir	Form (D) or	m: Direct Ir or Indirect B instr. 4) O	7. Nature of ndirect Beneficial Dwnership			
								Code	v	Amount	(A) (D)	or Pri	ice	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)	
Common Stock 02				02/0	02/20	2/2024 A			26,875 ⁽¹⁾ A		\$	0.00	0 26,875			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) if of (Native		ate,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		expiration Pate	Title	Amou or Numb of Sha	oer		Transaction(s) (Instr. 4)		<u>'</u>	
Employee Stock Option (right to buy)	\$17	02/02/2024			A		161,250		(2)	0	2/01/2034	Common Stock	161,	250	\$0.00	161,25	50	D	

Explanation of Responses:

1. The reported securities are restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of Common Stock of the Issuer. Twenty-five percent (25%) of the RSUs shall vest on February 15, 2025, and 1/16th of the RSUs shall vest in quarterly installments thereafter on the Issuer's standard quarterly vesting dates, subject to the Reporting Person's continued service through each applicable vesting date.

2. 25% of the shares underlying the option vest and become exercisable on February 2, 2025, and 1/48th of the shares underlying the option shall vest in monthly installments thereafter, subject to the Reporting Person's continuous service.

Remarks:

/s/ Jenny Robertson, attorneyin-fact

** Signature of Reporting Person

02/06/2024

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.