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

Report of Organizational Actions Affecting Basis of Securities

asis of Securities OMB No. 1545-0123

► See separate instructions.

Part Reporting	ssuer			
1 Issuer's name				2 Issuer's employer identification number (EIN)
Lexeo Therapeutics, Inc. &		85-4012572		
3 Name of contact for add	litional information	4 Telephor	ne No. of contact	5 Email address of contact
Investor Relations			(212) 547-9879	INVESTORS@LEXEOTX.COM
6 Number and street (or P	.O. box if mail is not	delivered to	street address) of contact	7 City, town, or post office, state, and ZIP code of contact
				parent order make Named for the
8 Date of action		New York, NY 10010		
o bate of detion		3 0103.	sification and description	
October 13, 2023		Commo	n Stock	
10 CUSIP number	11 Serial number	- International Contraction	12 Ticker symbol	13 Account number(s)
	·	, ,	,	,
Part II Organization	nal Action Attac	ch additiona	statements if needed. S	ee back of form for additional questions.
				te against which shareholders' ownership is measured for
the action ► On Octo	ber 13, 2023, Lexe	o Therapeuti	cs, Inc. effected a reverse	stock split at a ratio of 1-for-10.594230 shares of common
				will be automatically combined into one new share of
common stock. The revers	e stock split will be	e effected on	the total number of shares	s of common stock owned by each shareholder, and any
			11-20-20-1	t whole share of common stock based on the total
number of shares of comm	on stock owned by	each share	holder. In effect, no fraction	nal shares of common stock will be issued in connection
with the reverse stock split	In lieu of any frac	tional shares	s of common stock to whic	h the holder would otherwise be entitled, Lexeo
Therapeutics, Inc. will mak	e a cash payment e	equal to such	fraction multiplied by the	fair market value of a share of common stock as
determined in good faith b	y the Board of Dire	ctors of Lexe	eo Therapeutics, Inc.	
4E D. 7 (1) (2) (2)				
				rity in the hands of a U.S. taxpayer as an adjustment per
				of outstanding shares of common stock by combining
			5000	ate tax basis in their existing shares of common stock
				k held immediately after the reverse stock split.
				ares of common stock. As a result, each shareholder's
				ter the reverse stock split. The cash in lieu of fractional
				x basis is the amount paid for the fractional share.
				r of shares of common stock underlying the Company's and issuable under the Company's equity incentive plan.
			1100/30/	ssued, fully paid and non-assessable without further
				mon stock par value of \$0.0001 per share remains
unchanged after the revers		diry Sharen	older. In addition, the comi	Horr Stock par value of \$0.0001 per Share remains
	o ottoon opina			
16 Describe the calculation	n of the change in b	asis and the	data that supports the calcul	ation, such as the market values of securities and the
	-			norized shares of common stock issued and
				pact to the tax basis of the shares of common stock
				of each shareholder's total investment remains
			N	ratio of shares before and after the reverse stock split
the same of the sa				be given for the basis allocated to the fractional shares
of common stock that the s				

Part II	Organizational Action	(continued)
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			etion(s) and subsection(s) upon which the ta		
			368(a)(1)(E) of the Internal Revenue Cod		
			d if stock in a corporation is exchanged s		
			es that, in relevant part, the tax basis of		
			e stock exchanged. The tax treatment of		in lieu of fractional shares of
Stock is	teste	ed under Section 302 and will depen	d on each shareholder's specific facts ar	nd circumstances.	
_					
			cept to the extent of cash received in lieu lization for US Federal income tax purpo		s of common stock, the reverse
the tax e The info	effect: rmati	s of the reverse stock split is the tax on set forth in this Form 8937 does	plement the adjustment, such as the report able year that includes October 13, 2023 not constitute tax advice, does not take in aplete summary of the tax consequences	(e.g., 2023 for caler into account any sh	ndar year taxpayers). areholder's specific facts and
			own tax advisor with respect to their tax		
					TO TOTOL SO SESSION SENIE
Sign	Under belief, Signat	it is true, correct, and complete. Declaration	examined this return, including accompanying so n of preparer (other than officer) is based on all in	hedules and statements formation of which prep	parer has any knowledge.
	Print	our name ► RYAN MCHENRY		THE 1/0 /	20,000 (0000 -
	rincy	Print/Type preparer's name	Preparer's signature	Date /	OFORATE CONTROLLER
Paid		Christopher Booth	Christopher Booth		Check If DO4 44000E
Prepai			//	10/25/23	self-employed PU1418965
Use O	nly	Firm's name ► CFGI TAX SERVICE	S, LLC "		Firm's EIN ► 81-4833466
		Firm's address ► 1 Lincoln Street, Bo			Phone no. (617) 531-8270
Send For	m 890	37 (including accompanying statement	s) to: Department of the Treasury, Internal	Revenue Service. Oa	den, UT 84201-0054