Form **8937**(December 2017)
Department of the Treasury

## Report of Organizational Actions Affecting Basis of Securities

See separate instructions.

OMB No. 1545-0123

Internal Revenue Service			See Separate Instructions.	
Part I Reporting I	ssuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
Landos Biopharma, Inc.		81-5085535		
3 Name of contact for add	ditional information 4	5 Email address of contact		
Patrick Truesdell		info@landosbiopharma.com		
6 Number and street (or P	O. box if mail is not de	7 City, town, or post office, state, and ZIP code of contact		
4727 Valley View Blvd. #10	71	Roanoke, VA 24012		
8 Date of action		9 Classi	fication and description	
5/25/2023		1:10 Reve	erse Stock Split - Common	Stock
10 CUSIP number	0 CUSIP number 11 Serial number(s)		12 Ticker symbol	13 Account number(s)
515069201	N/A		LABP	N/A
Part II Organization	onal Action Attach	additional	statements if needed. Se	e back of form for additional questions.
				e against which shareholders' ownership is measured for
the action ► On May	25, 2023, Landos Bio	pharma, In	c. (the "Company") effecte	d a 1 for 10 Reverse Stock Split for its
Common Stock for Stockh	olders as of 5:00 p.m.	Eastern Ti	me. Pursuant to the Rever	se Stock Split, every ten (10) shares of
issued and outstanding co	mmon stock automati	cally conv	erted into one (1) share of	Common Stock. Any Stockholder who would
otherwise be entitled to a f	ractional share as a re	sult of the	Reverse Stock Split receiv	ved cash in lieu thereof.
share or as a percenta	ige of old basis ► The I	Reverse St	ock Split was a non-taxabl	ty in the hands of a U.S. taxpayer as an adjustment per e transaction. Upon the 1 for 10 Reverse Stock Split, shares of Common Stock. As a result of the Reverse
				Common Stock held immediately prior to the Reverse
				n (including fractional shares deemed received).
Stock Split among the sha	res or common stock	neiu iiiiiie	culatery after the transaction	in (including fractional shares deemed received).
16 Describe the calculation	on of the change in basi	is and the c	ata that supports the calcula	ation, such as the market values of securities and the
valuation dates ► <u>See</u>	answer to Item 15. Be	cause no f	ractional shares were issu	ed, the aggregate tax basis of Company stock held by
		<u> </u>		lit aggregate tax basis by an amount equal to the
aggregate tax basis alloca	ted to the tractional sh	ıare, ir any	•	

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Part		Organizational Action (continued)			· · · · · · · · · · · · · · · · · · ·	
		e applicable Internal Revenue Code section(s) and subsection(s) upon which the tax				
		tion, Section 354 - exchanges of stock and securities in certain reorganizations,	, Section	1 358 - basi	is to distributees, Revenue	
Ruling	12-31	1				
<b>18</b> C	an an	ny resulting loss be recognized? ► The 1 for 10 Reverse Stock Split should not co	onstitut	e a taxable	transaction, except to the	
		was received for fractional shares. Stockholders should consult their tax advis				
		with respect to their individual facts and circumstances for tax year 2023.			•	
<b>19</b> Pr	rovide	e any other information necessary to implement the adjustment, such as the reportal	ble tax y	ear ▶ <u>The r</u>	eportable year in which the	
Reverse	e Sto	ock Split occurred is 2023.				
		ation set forth in this Form 8937 does not constitute tax advice, does not take in				
		stances, and does not purport to be a complete summary of the tax consequence			<del></del>	
Each Si	tockr	holder should consult such Stockholder's own tax advisor with respect to the ta	ax conse	equences o	or the Reverse Stock Split.	
		der penalties of perjury, I declare that I have examined this return, including accompanying scheef, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all info				
Sian	Done	—DocuSigned by:	orriation c	n willon prop	are rias any knowledge.	
July 7, 2023						
11010	Sign	nature PAPICE PAISON PA	_ Date ►		-	
	D-:	typy name N. Datrick Truesdell	Title N	Dringing	Accounting Officer	
	Print	tryour name ► Patrick Truesdell  Print/Type preparer's name  Preparer's signature	Title ► Date	Principal	Accounting Officer PTIN	
Paid		The Mark and the M			Check if self-employed	
Prepa					Firm's EIN ▶	
Use C	JIIIY	Firm's address ►			Phone no.	
Send Fo	orm 8		levenue :	Service, Og		