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

Report of Organizational Actions Affecting Basis of Securities

See separate instructions.

OMB No. 1545-0123

Inte	ernal Revenue Service			See separate instructions).			
P	art I Reporting I	ssuer						
1	Issuer's name				2 Issuer's employer identification number (EIN)			
Ma	rker Therapeutics, Inc.				45-4497941			
3	Name of contact for add	ditional information	4 Telepho	ne No. of contact	5 Email address of contact			
Pe	ter Hoang			(713)400-6401	PHoang@MarkerTherapeutics.com			
6	Number and street (or F	P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact					
45	51 Kennedy Commerce	Drive			Houston, Texas 77032			
8	Date of action		9 Clas	9 Classification and description				
J	anuary 26, 2023		on Stock					
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)			
	57055L206	N/A		MRKR	N/A			
Р	art II Organizatio	onal Action Attac	ch additiona	l statements if needed. S	See back of form for additional questions.			
14	Describe the organiza the action ▶	tional action and, if a	applicable, th	e date of the action or the d	ate against which shareholders' ownership is measured for			
On	January 26, 2023, Mark	er Therapeutics, In	c. (the "Com	pany") effected a 1 for 10	Reverse Stock Split for its Common Stock for			
Sto	ockholders as of 5:00 p.	m. Eastern Time. Po	ursuant to th	ne Reverse Stock Split, eve	ery ten (10) shares of issued and outstanding			
Co	mmon Stock automatica	ally converted into	one (1) shar	e of Common Stock. Any S	Stockholder who would otherwise be entitled to a			
fra	ctional share as a result	of the Reserve Sto	ck Split rece	eived cash in lieu thereof.				
Sto	share or as a percenta ch Stockholder of the is ockholders will be requi	age of old basis ► Thessuer received a Coired to allocate the	ne Reverse S ommon Sha aggregate	tock Split was a non-taxal re in exhange for 10 Com tax basis in their Commo	ecurity in the hands of a U.S. taxpayer as an adjustment per ple transaction. Upon the the 1 for 10 Reverse Stock Split, amon Shares held. As a result of the Reverse Stock Split, an Stock held immediately prior to the Reverse Stock Split			
am	ong the shares of Comr	non Stock held imn	nediately aft	er the transaction (includi	ng fractional shares deemed received).			
16		_			lation, such as the market values of securities and the			
- 0					sued, the aggregate tax basis of Company stock held by			
	gregate tax basis alloca				lit aggregate tax basis by an amount equal to the			
ag	gregate tax basis alloca	ted to the tractiona	i Snare, ii an	у.				
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Part I		Organizational Action (continued)					
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		applicable Internal Revenue Code section	.,				tions Coetion 250 hasis
		68(a)(1)(E) - recapitalization, Section 3 s, Revenue Ruling 72-57	54 - exchanges of Stock	and securities in	certair	ı reorganı	zations, Section 358 - basis
to distri	Dutee	s, Nevenue Runng 72-57					
18 C	an any	resulting loss be recognized? ► The 1 f	or 10 Reverse Stock Spl	it should not con	stitute	a taxable	ransaction, except to the
		vas received for fractional shares. Stoc					
with res	spect t	o their individual facts and circumstan	ices for tax year 2023.				
40 D	.o. ido	any other information recognize implement	ment the adjustment auch	as the reportable	tov voc	. The se	a autable va au iu vubiab
		any other information necessary to impler Stock Split occurred is 2023.	ment the adjustment, such	as the reportable	tax yea	ir ► <u>i ne re</u>	portable year in which
tile Kev	erse s	Stock Split occurred is 2023.					
The info	ormati	on set forth in this Form 8937 does not	constitute tax advice, d	oes not take into	accou	nt any Sto	ckholder's specific facts
		ances, and does not purport to be a co					
		Each Stockholder should consult such					
Reverse	Stoc	k Split.					
		r penalties of perjury, I declare that I have exa it is true, correct, and complete. Declaration of					
Sign Here	C:-	- // H			Dat- :	21010	022
	Signa	rule - + / //			Date ►	3/8/2	UZS
	Print	your name Michael J. Loiacono			Title►	Chief Acc	ounting Officer
Daid	1	Print/Type preparer's name	Preparer's signature		Date		PTIN
Paid Prepa	rer						Check if self-employed
Use C		Firm's name ►					Firm's EIN ►
230 (- · · · y	Firm's address ▶					Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054