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

Report of Organizational Actions
Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part Reporting	ssuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
StoneCo Ltd.				
3 Name of contact for add	ditional information	5 Email address of contact		
Roberta Bartoli De Noron	ha Shimizu	investors@stone.com.br		
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		
4th Floor, Harbour Place	103 South Church St	reet, P.O. B	ox 10240	Grand Cayman, KY1-1002, Cayman Island
8 Date of action				
August 29, 2024				
10 CUSIP number	11 Serial number(s	<u> </u>	12 Ticker symbol	13 Account number(s)
See attached.				
Part II Organization	 	h additiona	 statements if needed Se	ee back of form for additional questions.
				te against which shareholders' ownership is measured for
the action ► See att		opiicable, th	e date of the action of the da	te against which shareholders, ownership is measured for
15 Describe the quantitate share or as a percentar	-			rity in the hands of a U.S. taxpayer as an adjustment per
-				
Describe the calculativaluation dates ► Secondaria	•	asis and the	data that supports the calcul	lation, such as the market values of securities and the

17	List the	applicable Int	ernal Revenue Code	e section(s) and subsection	(s) upon which the tax t	reatment is based I	See attached.
18	Can an	y resulting los	s be recognized? ►	See attached.			
19	Provide	anv other info	ormation necessary	to implement the adjustme	nt. such as the reportat	ole tax vear ▶ See	attached.
		•	·	,	,		
	Unde belief	er penalties of p	erjury, I declare that I lect, and complete. Decl	nave examined this return, incl aration of preparer (other than	uding accompanying sche officer) is based on all info	edules and statements rmation of which prep	, and to the best of my knowledge and arer has any knowledge.
Sign	.						
Here	.	ature ▶		At-le	and they late	Date ►	
	Joigh						
		1		ado and André Monteiro		Title ►	DTIN
Paic		Print/Type pre	eparer's name	Preparer's signature	=	Date	Check if PTIN
	oarer						self-employed
Use	Only	Firm's name	•				Firm's EIN ▶
		Firm's addres	s ►				Phone no.
Send	Form 89	937 (includina	accompanying state	ements) to: Department of t	he Treasury, Internal Re	evenue Service. Oa	den. UT 84201-0054