FORM 3

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  LEFF JONATHAN S	2. Date of E Requiring S (Month/Day 05/28/202	Statement //Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol  Larimar Therapeutics, Inc. [ LRMR ]				
(Last) (First) (Middle)  C/O LARIMAR THERAPEUTICS, INC.			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)	
THREE BALA PLAZA EAST, SUITE 506			Officer (give title below)  Officer (give below)		(specify	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person	
(Street) BALA CYNWYD PA 19004							by More than One Person
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	y (Instr. 4)  2. Date Exercisable ar Expiration Date (Month/Day/Year)		Underlying Derivative Security (Instr. 4)		4. Conversion or Exercion Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security		3)

**Explanation of Responses:** 

#### Remarks:

No securities are beneficially owned.

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/s/ Jennifer Johansson, Attorney-in-Fact

06/05/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- $^{\star\star} \ Intentional \ misstatements \ or \ omissions \ of facts \ constitute \ Federal \ Criminal \ Violations \ See \ 18 \ U.S.C. \ 1001 \ and \ 15 \ U.S.C. \ 78 \ ff(a).$

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.

#### POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints the Vice President of Regulatory Affairs and Counsel and Chief Financial Officer of Larimar Therapeutics, Inc. (the "Company") with full power to act singly, as the undersigned's true and lawful attorneys-in-fact, with full power of substitution, to:

- (1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director and/or beneficial owner of the Company, Forms 3, 4, and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934, as amended, and the rules thereunder;
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4, or 5, complete and execute any amendment or amendments thereto, and timely file such form with the SEC and any stock exchange or similar authority; and
- (3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by such attorney in fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-fact's discretion.

The undersigned hereby grants to the attorneys-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact or such attorney-infact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

This power of attorney shall remain in full force and effect until revoked by the undersigned in a signed writing delivered to the attorney-in-fact. IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 28th day of May, 2020.

/s/Jonathan Leff

Jonathan Leff