FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL											
OMB Number:	3235-0287										
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0.5

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	Check this box if no longer subject
$\Box$	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* <u>Truitt Joseph</u>					2. Issuer Name and Ticker or Trading Symbol Larimar Therapeutics, Inc. [ LRMR ]										ck all app	ationship of Reporting Perso k all applicable) Director			on(s) to Issuer
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023									er (give title v)		Other (s	specify
C/O LARIMAR THERAPEUTICS, INC. THREE BALA PLAZA EAST, SUITE 506														Line)	Individual or Joint/Group Filing (Check Applicabl Line)     X Form filed by One Reporting Person				
(Street) BALA															Form filed by More than One Reporting Person				
CYNWY	ZD PA	, I'	19004			Rule 10b5-1(c) Transaction Indication													
(City)	(St	ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	l - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	posed of	, or	Bene	eficial	ly Owr	ned			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date		ution Date, /		Transaction Disposed Code (Instr. 5)			ties Acquired (A Of (D) (Instr. 3,			5. Amo Securi Benefi Owned Follow	ties cially I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A)	) or )	Price	Reported Transaction(s) (Instr. 3 and 4)		, ,		,	
Common Stock 05/17/2						2023			P		2,750	0 A		\$3.73	2,750			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, if any			tion Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities ired r osed )	ve es d		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amo or Num of Shai	ber					

Explanation of Responses:

/s/ Jennifer Johansson, Attorney-in-fact

05/18/2023

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).