FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 3235-0104 Estimated average burden

0.5

hours per response:

## 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

Name and Address of Reporting Person*     Duva Jason A			Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 04/22/2021  3. Issuer Name and Ticker or Trading Symbol Latham Group, Inc. [ SWIM ]					
(Last) (First) (Middle) C/O LATHAM GROUP, INC.				4. Relationship of Reporting Person(s) Issuer (Check all applicable)  Director 10% Ov		É F	5. If Amendment, Date of Original Filed (Month/Day/Year)		
787 WATERVLIET SHAKER ROAD			=		Director  X Officer (give title below)  Gen. Counsel & Ch.	Other below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person	
(Street) LATHAM	NY	12110			Gen. Counsel & Ch.	iei Auilli	ii OII	Form filed by More than One Reporting Person	
(City)	(State)	(Zip)							
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: I (D) or II (I) (Inst	Direct Owndirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of		6. Nature of Indirect Beneficial Ownership (Instr.
					Amount or Number	Derivative Security	or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

No securities are beneficially owned.

/s/ Jason Duva 04/22/2021

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