FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours ner resnonse.	0.5								

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

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*					2. Issuer Name and Ticker or Trading Symbol TRANSACT TECHNOLOGIES INC [TACT								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SHULDMAN BART C					۱t	TRAINSACT TECHNOLOGIES INC [TACT]								X Directo	,	10% Owner		ner		
-					- 1										(give title		Other (sp	pecify		
(Last)	`	,	(Middle)		3.	3. Date of Earliest Transaction (Month/Day/Year)							_	below)	Chairma	ın & C	below)			
ONE HAMDEN CENTER					11	11/10/2010									Chairme	iii & C.	LO			
2319 WHITNEY AVENUE, SUITE 3B																				
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
HAMDEN CT 06518													X Form filed by One Reporting Person							
——————————————————————————————————————				_									Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)												1 613011					
		Tal	ole I - No	n-Der	ivativ	e Se	curi	ties Ac	quired	l, Dis	sposed of	f, or Ber	neficial	ly Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					Execution Date,		Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amour Securities Beneficia Owned Fe	s llly	6. Owne Form: D (D) or In (I) (Instr	Direct Indirect Be	7. Nature of ndirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)		(Ir	nstr. 4)		
Common Stock														4,8	00	I	D	aughters		
Common Stock													3,7	'50	I	M	Iother			
Common Stock													1,5	000	I	S	pouse			
Common Stock 11/10/2				0/2010	.010		М		6,000(1)	A	\$3.766	7 18,	500	D						
Common Stock 11/10/2				0/2010	10		S		7,000(1)	D	\$8.77	2) 11,5	500							
			Table II -								oosed of, convertib			Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactio Code (Inst 8)				6. Date Exercis Expiration Date (Month/Day/Yea		te Amount of		f s g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e C s F lly C o	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	J.1(3)				
Stock Option	\$3.7667	11/10/2010			M			6,000 ⁽¹⁾	05/17/2	2003	05/17/2012	/2012 Common Stock 6,0		\$3.7667	144,250		D			

Explanation of Responses:

- $1. \ Shares \ sold \ pursuant \ to \ a \ securities \ trading \ plan \ under \ Rule \ 10b5-1 \ adopted \ in \ March \ 2010.$
- 2. Represents the sale of 7,000 shares in 24 separate transactions, ranging from \$8.57 to \$8.98 per share, resulting in a weighted average sale price per share of \$8.77. For all transactions reported in this Form 4 utilizing a weighted average price, the reporting person undertakes to provide upon request by the SEC staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price within the range.

Bart C. Shuldman

11/12/2010

** Signature of Reporting Person

Date

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

- * If the form is filed by more than one reporting person, see Instruction 4 (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.