FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vasilingion, D.C. 20049		

OMB APE	PROVAL
OMB Number:	3235-0287
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0.5

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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 7									
Name and Address of Reporting Person* Hoffman Andrew John					2. Issuer Name and Ticker or Trading Symbol TRANSACT TECHNOLOGIES INC TACT 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)															
Hoffma	an Andrey	<u>w John</u>			۱ ۲		.5.1.01		<u> </u>		<u> </u>	<u></u> [1111	~		Director			10% Ow	ner	
(Loot)	/5	irst)	(Middle)		- [X	Officer (below)	give title		Other (s below)	pecify	
(Last)	`	,	(iviluale)		3. 1	3. Date of Earliest Transaction (Month/Day/Year)								SVP, Operations						
ONE HAMDEN CENTER					02	02/27/2008														
2319 WI	HITNEY AV	VENUE, SUITE	3B		\vdash								_							
					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													l,	X	Form fil	ed by One F	Renor	tina Person	1	
HAMDE	N C	Т	06518											71		ed by More	•	•		
					-										Person	ed by More	uiaii	One Report	iiig	
(City)	(S	tate)	(Zip)																	
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		ıaı	ole I - Non	1-Deriv	vativ	e Se	curities	S AC	quirea, L	וצוע	oosea o	r, or Bei	петісі	ally	Owned					
1. Title of Security (Instr. 3) 2. Trans				sactior	action 2A. Deemed Execution Date.			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4									7. Nature of ndirect			
					(Month/Day/Year)				Code (Instr.		. 5)		u. 3, 4 c	iiiu	Beneficia	Beneficially		Indirect E	Beneficial Ownership (Instr. 4)	
				_									Owned F Reported			I) (Ins				
								Code	V	Amount	(A) or Pri		e	Transacti (Instr. 3 a						
															1,	,				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				(e.g., p	puts,	, caii	s, warr	ants	, options	s, c	onvertin	ne secu	rities)						
1. Title of	2.	3. Transaction	3A. Deemed		4. Transaction		5. Number of		6. Date Exercisable and Expiration Date			7. Title and Am of Securities Underlying			8. Price of Derivative	9. Number of derivative		10.	11. Nature of Indirect	
Security or Exercise (Month/Day/Year) if any Co				Code (Derivati	ve	(Month/Day		r)	- 1			Security	Securities		Ownership Form:	Beneficial		
(Instr. 3) Price of (Month/Day/Year) 8)					8)	Securities Derivative Securities Acquired (Instr. 3 and 4							ity	(Instr. 5)	Beneficially Owned		or Indirect (Instr. 4)	Ownership		
Security						(A) or							1u 1)		Follo	Following			(
						Disposed of (D) (Instr.									Reported Transaction(s)	n(s)				
				L		3, 4 ánd 5		5)								(Instr. 4)	Ì			
				Γ						Τ			Amou	ınt						
													or Numb	er						
					Code	v	(A)		Date Exercisable		Expiration Date	Title	of Share	s						
Stock Option	\$5.24	02/27/2008			A		10,000		02/27/2009 ⁽³	1) (02/27/2018	Common Stock	10,0	00	\$5.24	10,000		D		
	1		1																1	

Explanation of Responses:

1. Grant of non-qualified stock option under the Company's 2005 Equity Incentive Plan. The option becomes exercisable 20% per year on each anniversary of the date of grant.

Steven A. DeMartino, Attorney-in-Fact 02/29/2008

** 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.