FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235- 0104							
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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

Bahri Gaurav			2. Date of E Requiring S (Month/Day 03/21/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol  TRANSACT TECHNOLOGIES INC [ TACT ]						
(Last)	(First)	(Middle)	03/21/2022		4. Relationship of Reporting Issuer (Check all applicable)		Fi	5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) FAIRFAX (City)	VA (State)	22033 (Zip)	-		Officer (give title below)  Chief Revenue	below)	(specify (C	Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			2	2. Amount of Securities Beneficially Owned (Instr. I)	3. Owner Form: I (D) or II (I) (Inst	ership 4. N Direct Ow ndirect	1. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock					0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date Expiration Date Expiration Date Expiration Date Expiration Date Exercisable Date		ate	3. Title and Amount of So Underlying Derivative So (Instr. 4)		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr.				
			Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)			

**Explanation of Responses:** 

Gaurav Bahri

03/23/2022

\*\* 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 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.