(City)

(State)

(Zip)

FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## OMB APPROVAL 3235-0104 OMB Number: Estimated average burden hours per response:

0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

			16(a) of the Securities Exchai the Investment Company Ac		1934				
1. Name and Address of Reporting Person* B. Riley Financial, Inc.	2. Date of Event Requiring Statement (Month/Day/Year) 07/05/2022		3. Issuer Name and Ticker or Trading Symbol  TRANSACT TECHNOLOGIES INC [ TACT ]						
(Last) (First) (Middle) 11100 SANTA MONICA BOULEVARD,			Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 800 (Street)	-		Officer (give title below)	Other below	(specify )		eck Applicable	oint/Group Filing e Line) by One Reporting	
LOS ANGELES CA 90025	_					)	Form filed Reporting	by More than One Person	
(City) (State) (Zip)									
Ta	ıble I - Non	-Derivat	ive Securities Benefi	cially O	wned				
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Own Form: I (D) or I (I) (Inst	Direct ndirect		ature of Indire ership (Instr.		
Common Stock			1,002,140		By B. Riley Securities, Inc. (1)(3)		urities, Inc. <sup>(1)(2)(3)</sup>		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative S (Instr. 4)		urity Conversion Ownership Ir or Exercise Form: C		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiratio Date	n Title	Amount or Number of Shares		tive	or Indirect (I) (Instr. 5)	,	
1. Name and Address of Reporting Person*			,						
B. Riley Financial, Inc.		_							
(Last) (First) (Mid	idle)								
11100 SANTA MONICA BOULEVARD, SUITE 800									
(Street)		_							
LOS ANGELES CA 900	)25	_							
(City) (State) (Zip	)								
1. Name and Address of Reporting Person*  B. Riley Securities, Inc.									
(Last) (First) (Mid 11100 SANTA MONICA BOULEVAL SUITE 800	ddle) RD,								
(Street) LOS ANGELES CA 900	)25								

1. Name and Address of Reporting Person*  RILEY BRYANT R						
(Last)	(First)	(Middle)				
11100 SANTA MONICA BOULEVARD,						
SUITE 800						
(Street)						
LOS ANGELES	CA	90025				
(City)	(State)	(Zip)				

## **Explanation of Responses:**

- 1. This Form 3 is being filed jointly by B. Riley Financial, Inc., a Delaware corporation ("BRF"), B. Riley Securities, Inc., a Delaware corporation ("BRS"), and Bryant R. Riley.
- 2. BRF is the parent company of BRS. As a result, BRF may be deemed to indirectly beneficially own the securities of TransAct Technologies, Inc. (the "Issuer") held of record by BRS. BRF expressly disclaims beneficial ownership of the securities of the Issuer reported herein held indirectly except to the extent of such Reporting Person's pecuniary interest therein
- 3. Bryant R. Riley, as Chairman and Co-Chief Executive Officer of BRF, has voting power and dispositive power over the securities of the Issuer held of record by BRS. As a result, Bryant R. Riley may be deemed to indirectly beneficially own the securities of the Issuer held of record by BRS. Bryant R. Riley expressly disclaims beneficial ownership of the securities of the Issuer reported herein held indirectly except to the extent of his pecuniary interest therein.

B. Riley Financial, Inc.,
by: /s/ Bryant R. Riley,
Co-Chief Executive
Officer

B. Riley Securities, Inc.
by: /s/ Andrew Moore,
Chief Executive Officer
/s/ Bryant R. Riley
\*\* Signature of Reporting
Person

07/14/2022

07/14/2022
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.