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

						16(a) of the Securities Excha the Investment Company Ac			934				
1. Name and 325 Mas	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 05/08/2023		3. Issuer Name and Ticker or Trading Symbol TRANSACT TECHNOLOGIES INC [ TACT ]									
	(First) D AVENUI	(Middle)	(Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner					5. If Amendment, Date of Original Filed (Month/Day/Year)		
20TH FLO	_			Officer (give title below)	Λ		specify	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X Form filed by More than One Reporting Person					
(Street) NEW YORK	NY	10017											
(City)	(State)	(Zip)											
			able I - Nor	ı-D	erivati	ive Securities Benefi	icia	ally Ov	vned				
1. Title of Security (Instr. 4)					- 1	2. Amount of Securities 3. Own Beneficially Owned (Instr. 4) (D) or I (I) (Inst			irect direct	Ownership (Instr. 5)			
Common Stock, par value \$0.01 per share					1,011,789		D <sup>(1)(2)</sup>						
		(e.g				e Securities Benefici nts, options, conver				)			
Ex			2. Date Exerc Expiration D (Month/Day/	ate		3. Title and Amount of Se Underlying Derivative Sec (Instr. 4)				rcise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date	 	xpiratior		or	umber	Derivat Securit	ive	or Indirect (I) (Instr. 5)	3)	
			Exercisable		ate	Title		hares					
	Address of F ster Fund	Reporting Person* LP											
(Last) (First) (Mide			iddle)										
757 THIR 20TH FLO	D AVENUI OOR	E											
(Street) NEW YORK NY 10017													
(City)	City) (State) (Zip)												
	Address of F ital GP, L	Reporting Person*											
	(Last) (First) (Mid 757 THIRD AVENUE 20TH FLOOR		iddle)										
(Street)	PK NV	10	017										

**Explanation of Responses:** 

(State)

(Zip)

(City)

- 1. This Form 3 is being filed by 325 Capital Master Fund LP, a Cayman Islands exempted limited partnership ("325 Master Fund") and 325 Capital GP, LLC, a Delaware limited liability company registered as a foreign partnership in the Cayman Islands ("325 Capital GP"), who are part of a group that have filed a separate Form 3. The additional group members include 325 Capital LLC, a Delaware limited liability company ("325"), Michael Braner, a United States citizen, Daniel Friedberg, a United States citizen, and Anil Shrivastava, a United States citizen (collectively with 325 Master Fund and 325 Capital GP, the "Reporting Persons").
- 2. Securities owned directly by 325 Master Fund. 325 Capital GP is the general partner of 325 Master Fund, 325 is the investment manager to 325 Master Fund, and each of Messrs. Braner, Friedberg and Shrivastava are Managing Members of 325. As a result of these relationships, all of the Reporting Persons may be deemed to beneficially own the securities owned directly by 325 Master Fund.

## Remarks:

For purposes of Section 16 of the Securities Exchange Act of 1934, as amended, each of the Reporting Persons (other than Mr. Friedberg) may be deemed a director by deputization.

325 Master Fund LP, By
/s/ Michael D. Braner,
Name: Michael D. Braner,
Title: Managing Member

325 Capital GP, LLC, By
/s/ Michael D. Braner,
Name: Michael D. Braner,
Title: Managing Member

\*\* 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.