FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

| OMB APPROVAL      |          |  |  |  |  |  |  |  |  |  |
|-------------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number:       | 3235-028 |  |  |  |  |  |  |  |  |  |
| Estimated average | hurden   |  |  |  |  |  |  |  |  |  |

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

|   |                  |                     |                           |          | OI.  | Secur   | 30(11)       | OI LIII                 | C IIIVC      | esunenic                                    | Joinpa      | ally Act       | 01 1340             |                        |   |                            |                     |                         |  |  |
|---|------------------|---------------------|---------------------------|----------|--|---|--------------|-------------------------|--------------|---|-------------|----------------|---------------------|------------------------|---|----------------------------|---------------------|-------------------------|--|--|
| 1. Name and Address of Reporting Person* TANAKA GRAHAM Y    |                  |                     |                           |          |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol TRANSACT TECHNOLOGIES INC TACT |              |                         |              |   |             |                |                     |                        | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                            |                     |                         |  |  |
| IANAKA GRAHAM Y   |                  |                     |                           | TA       | X Direc  |   |              |                         |              |   |             |                |                     |                        | tor   | or                         |                     | ner                     |  |  |
| (Loot)  | (                | irot)               | (A 4: - -                 |          |  |   |              |                         |              |   |             |                |                     |                        |   | Officer (give title below) |                     | Other (s<br>below)      | pecify   |  |
| (Last) (First) (Middle) 369 LEXINGTON AVENUE                |                  |                     |                           | 3. [     | 3. Date of Earliest Transaction (Month/Day/Year) |   |              |                         |              |   |             |                |                     | belov                  | ,   |                            | belowy              |                         |  |  |
|   |                  | AVENUE              |                           |          | 05   | /30/20  | 012          |                         |              |   |             |                |                     |                        |   |                            |                     |                         |  |  |
| 20TH FI   | LOOR             |                     |                           |          |  | f A   | - do         | Doto                    | of O:        | riainal Cil                                 | ad / N /    | 1 anth/Da      | (\(\(\alpha\)\)     |                        | مطنينطييما م  | loint/Croup                | Filing              | (Chool: Ann             | liaabla  |  |
|   |                  |                     |                           |          | -   4. 1   | i Amer  | nament,      | Date                    | or Or        | riginal Fil                                 | ea (IVI     | nontn/Da       | y/ Year)            | Lin                    |   | Joint/Group                | Hiing               | (Спеск Арр              | ilcable  |  |
| (Street)  | ODIZ N           | 5.7                 | 10017                     |          |  |   |              |                         |              |   |             |                |                     |                        | X Form  | filed by One               | Repo                | rting Person            |  |  |
| NEW YO  | ORK N            | Y                   | 10017                     |          |  |   |              |                         |              |   |             |                |                     |                        |   | filed by More              | e than              | One Report              | ing  |  |
| (City)  | (6)              | toto)               | (7in)                     |          | -  |   |              |                         |              |   |             |                |                     |                        | Perso   | on                         |                     |                         |  |  |
| (City)  | (5               | tate)               | (Zip)                     |          |  |   |              |                         |              |   |             |                |                     |                        |   |                            |                     |                         |  |  |
|   |                  | Tab                 | le I - Non                | ı-Deriv  | vativ  | e Sec   | curitie      | s A                     | cqui         | ired, D                                     | ispo        | sed o          | f, or Bei           | neficial               | ly Owne   | d                          |                     |                         |  |  |
| 1. Title of S   | Security (Ins    | tr. 3)              |                           | 2. Trans | saction  |   |              |                         |              |   |             |                |                     | 5. Amo                 |   |                            |                     | 7. Nature               |  |  |
| Date (Month/Da  |                  |                     |                           |          | /Day/Ye  | ay/Year)   Execution  |              |                         |              | , Transaction Disposed (<br>Code (Instr. 5) |             |                | Of (D) (Ins         | tr. 3, 4 and           | I Securii<br>Benefi   |                            |                     |                         | of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |                  |                     |                           |          | (1   | Month/Day/Ye  |              | ar) 8                   | 8) '         |   |             |                |                     | Owned Report           |   |                            |                     |                         |  |  |
|   |                  |                     |                           |          |  |   |              |                         | Code V       | ·   A                                       | Amount      | (A) or<br>(D)  | Price               | Transa                 | ransaction(s)<br>nstr. 3 and 4)   |                            |                     | ,                       |  |  |
|   |                  |                     |                           |          |  |   |              |                         |              |   |             |                |                     |                        |   |                            |                     |                         |  |  |
|   |                  | ٦                   | ا - Table II              |          |  |   |              |                         |              |   |             |                | or Bene<br>ole secu |                        | Owned   |                            |                     |                         |  |  |
|   |                  | 1                   |                           |          | Juis,  | Cans  | 1            |                         |              |   |             |                |                     |                        |   |                            |                     |                         |  |  |
| 1. Title of<br>Derivative                                   | 2.<br>Conversion | 3. Transaction Date | 3A. Deemed<br>Execution D |          | 4.<br>Transa                                     | ction   | 5. Number of |                         |              |   |             | 7. Title and   |                     | 8. Price o             | 9. Number of derivative   |                            | 10.<br>Ownership    | 11. Nature of Indirect  |  |  |
| Security or Exercise (Month/Day/Year) if any                |                  |                     | _ ` [·                    | Code (   |  | Derivative<br>Securities  |              | (Month/Day/Year) Securi |              |   |             | Securities     |                     | Security<br>(Instr. 5) | Securities<br>Beneficially  |                            | Form:<br>Direct (D) | Beneficial<br>Ownership |  |  |
| (Instr. 3) Price of Derivative Security (Month/Day/Year) 8) |                  |                     |                           |          | 8)   | Securities Underlying Acquired Derivative Sec (A) or (Instr. 3 and 4)             |              |                         |              |   |             | Security       | (Instr. 5)          | Owned                  | ´   | or Indirect (Inst          | (Instr. 4)          |                         |  |  |
|   |                  |                     |                           |          |  |   |              |                         |              |   |             | nd 4)          |                     | Following<br>Reported  |   | (I) (Instr. 4)             |                     |                         |  |  |
|   |                  |                     |                           |          |  | of (D)  |              |                         |              |   |             |                |                     |                        | Transaction(s)<br>(Instr. 4)  | on(s)                      |                     |                         |  |  |
|   |                  |                     |                           |          |  |   | and 5)       |                         |              |   |             |                |                     |                        | (111301.4)  |                            |                     |                         |  |  |
|   |                  |                     |                           |          |  |   |              |                         |              |   |             |                |                     | Amount                 | 1   |                            |                     |                         |  |  |
|   |                  |                     |                           |          |  |   |              |                         |              |   |             |                |                     | or<br>Number           |   |                            |                     |                         |  |  |
|   |                  |                     |                           | -        | Code   | v   | (A)          | (D)                     | Date<br>Exer | e<br>rcisable                               | Exp<br>Date | oiration<br>te | Title               | of<br>Shares           |   |                            |                     |                         |  |  |
| Stock<br>Option   | \$7.82           | 05/30/2012          |                           |          | A  |   | 7,500        |                         | 05/30        | 0/2013 <sup>(1)</sup>                       | 05/3        | 30/2022        | Common<br>Stock     | 7,500                  | \$7.82  | 7,500                      |                     | D                       |  |  |

## **Explanation of Responses:**

1. Grant of non-qualified stock option under the Company's 2005 Equity Incentive Plan. The option becomes exercisable 25% per year on each anniversary of the date of grant.

Steven A. DeMartino, Attorney-In-Fact

06/01/2012

\*\* Signature of Reporting Person

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.