Sloyer Elliot Form 3/A March 16, 2012

# FORM 3

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

3235-0104

2005

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires:

Estimated average burden hours per

response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

Sloyer Elliot

(Last)

(First)

35 TOILSOME BROOK ROAD

(Street)

(Middle)

Statement

(Month/Day/Year)

03/06/2012

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

TRANS LUX CORP [TNLX]

Person(s) to Issuer

Officer

4. Relationship of Reporting

Filed(Month/Day/Year)

03/08/2012

(Check all applicable)

\_X\_\_ Director 10% Owner

(give title below) (specify below)

\_Other

6. Individual or Joint/Group Filing(Check Applicable Line)

5. If Amendment, Date Original

\_X\_ Form filed by One Reporting

Form filed by More than One Reporting Person

STAMFORD, CTÂ 06905

(City) (State)

1. Title of Security

(Instr. 4)

(Zip)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial

Ownership (Instr. 5)

Direct (D) or Indirect (I)

(Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Title

1. Title of Derivative Security

(Instr. 4)

2. Date Exercisable and **Expiration Date** 

(Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

4. Conversion or Exercise Price of

Derivative

Security

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership

Date Expiration Exercisable Date

Amount or Number of Security: Direct (D) or Indirect (Instr. 5)

(I) Shares

(Instr. 5)

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A Warrants (4)	11/14/2011	11/13/2012	Common Stock	50,000	\$ 1 (1)	I	Fund manager and investor
B Warrants (4)	(2)	11/13/2014	Common	50,000	\$ 1 <u>(3)</u>	I	Fund manager

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
<b></b>	Director	10% Owner	Officer	Other		
Sloyer Elliot 35 TOILSOME BROOK ROAD STAMFORD, CT 06905	ÂΧ	Â	Â	Â		

## **Signatures**

/s/ Elliot S.
Sloyer

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

- \* 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).
- Each "A" Warrant entitles the holder to purchase one share of Common Stock at an exercise price of \$1.00 per share, subject to
  (1) adjustment to \$0.20 per share at such time as the Certificate of Incorporation of the Company is amended to reduce the par value of the Common Stock to an amount less than \$0.10.
- (2) The "B" Warrant is exercisable upon the holder's exercise of the "A" Warrant, pursuant to which the "B" Warrant is issued, and is exercisable for three years from date of the transaction.
- Each "B" Warrant entitles the holder to purchase one share of Common Stock at an exercise price of \$1.00 per share, subject to

  (3) adjustment to \$0.50 per share at such time as the Certificate of Incorporation of the Company is amended to reduce the par value of the Common Stock to an amount less than \$0.10.
- (4) Owned by WestLane Equity Income Fund LP, of which I exercise voting and investment control as the fund manager and investor.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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