

Sloyer Elliot  
 Form 3/A  
 March 16, 2012

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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 * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol  |  |
| Â Sloyer Elliot                           |         | (Month/Day/Year)                     | TRANS LUX CORP [TNLX]   |  |
| (Last)                                    | (First) | (Middle)                             | 03/06/2012  |  |
| 35 TOILSOME BROOK ROAD                    |         |                                      | 4. Relationship of Reporting Person(s) to Issuer  |  |
| (Street)                                  |         |                                      | (Check all applicable)  |  |
| STAMFORD,Â CTÂ 06905                      |         |                                      | <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br><input type="checkbox"/> Officer <input type="checkbox"/> Other<br>(give title below)    (specify below) |  |
| (City)                                    | (State) | (Zip)                                | 5. If Amendment, Date Original Filed(Month/Day/Year)  |  |
|   |         |                                      | 03/08/2012  |  |
|   |         |                                      | 6. Individual or Joint/Group Filing(Check Applicable Line)  |  |
|   |         |                                      | <input checked="" type="checkbox"/> Form filed by One Reporting Person  |  |
|   |         |                                      | <input type="checkbox"/> Form filed by More than One Reporting Person   |  |

**Table I - Non-Derivative Securities Beneficially Owned**

|                                    |  |   |  |
|------------------------------------|--|---|--|
| 1. Title of Security<br>(Instr. 4) | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(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)**

|   |   |  |  |  |  |
|---|---|--|--|--|--|
| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|   | Date Exercisable  | Expiration Date  |  |  |  |
|   |   | Title  | Amount or Number of Shares                             |  |  |

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

## Reporting Owners

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

## Signatures

/s/ Elliot S.                      03/16/2012  
Sloyer

           \*\*Signature of                      Date  
Reporting Person

## 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).
  - (1) Each "A" Warrant entitles the holder to purchase one share of Common Stock at an exercise price of \$1.00 per share, subject to 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.
    - (3) Each "B" Warrant entitles the holder to purchase one share of Common Stock at an exercise price of \$1.00 per share, subject to 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.