FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMBA

OMB APP	ROVAL
OMB Number: Estimated average	3235-028
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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

					or S	ectio	n 30(r	i) of the i	nvesimen	Cor	npany Act o	1940								
1. Name and Address of Reporting Person* Humphreys Michael Julian						2. Issuer Name and Ticker or Trading Symbol Transphorm, Inc. [TGAN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>rumphreys Michael Julian</u>														>	Directo	r		10% Ow	ner	
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 07/21/2023									(give title		Other (spelow)	pecify	
C/O TRANSPHORM, INC.						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
75 CASTILIAN DRIVE					""	In Americanical, Date of Original Filed (World) Day/Teal)									Line)					
															X Form filed by One Reporting Person					
(Street) GOLETA CA 93117														Form fi Person		e than	One Repor	ting		
GOLETA CA 9311/					Rule 10b5-1(c) Transaction Indication															
(0:)	(0)		·		Krie tono-t(c) Hansaction indication															
(City) (State) (Zip)						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	e I - No	n-Deriv	ative	Sec	uriti	es Acc	quired, I	Disp	osed o	f, or B	ene	eficiall	y Owned					
1. Title of Se	ecurity (Instr	. 3)		2. Trans	action		A. Deemed xecution Date.		3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3,								7. Nature of Indirect			
					Day/Year) if a	if any (Month/Day/Year)		Code (Instr. 5)		1 OI (D) (IIISII. 3, 4		s, 4 anu	Benefici	ially (D) Following (I)	(D) o	or Indirect Instr. 4)	Beneficial Ownership (Instr. 4)		
								Code	v	Amount		(A) or (D)		Transact (Instr. 3	ion(s)			(111501. 4)		
Common Stock				07/21	21/2023				M		1,675(1)	A	\$3.3	36,	,675 С		D		
		Ta	ble II -	Deriva	tive S	ecu	rities	s Acau	ired. Di	isno	sed of,	or Be	nefi	icially	Owned			,		
											onvertik				• · · · · · · · ·					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
													0	Amount or						
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	0	Number of Shares						
Subscription Rights (right to	\$3.3	07/21/2023			М			21,875	06/25/202	23 (07/21/2023	Commo		1,675	\$0.00	0		D		

Explanation of Responses:

1. Represents Issuer common stock acquired by the reporting person following the exercise of non-transferable subscription rights distributed in connection with the Issuer's rights offering to stockholders of record on June 26, 2023, as described in the Issuer's prospectus supplement dated July 5, 2023 and the accompanying base prospectus.

Remarks:

buy)

/s/ Cameron McAulay, Attorney-in-Fact

** Signature of Reporting Person Date

07/25/2023

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.