| FORM 4 | 1 |
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(Print or Type Responses)

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Responses) | | | | | | | | | | | |
|--|--|--|------------------|-----------------------------------|---------------------------------------|--|---|------------|------------------|--|-------------------------|
| 1. Name and Address of Re Naccarato Ben | 2. Issuer Name and PERMA FIX EN INC [pesi] | | | e , | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | | |
| (Last) 8302 DUNWOODY P | 3. Date of Earliest T 05/14/2020 | ransaction (| Mont | th/Day/Ye | ear) | | Incer | | | | |
| ATLANTA, GA 3035 | | 4. If Amendment, D | ate Original | Filec | d(Month/Day | y/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) | Т | able I - No | ired, Disposed of, or Beneficially Ow | eficially Owned | | | | | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Year) | | 3. Transact Code (Instr. 8) | tion | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Transaction(s) | Ownership Form: of Indir Benefic | Beneficial |
| | | | (Month/Day/Year) | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | Direct (D) or Indirect (I) (Instr. 4) | Ownershij (Instr. 4) |
| Common Stock | | 05/14/2020 | | Р | | 218 | А | \$6 | 3,218 | D | |
| Common Stock | | 05/14/2020 | | Р | | 100 | А | \$ 5.99 | 3,318 | D | |

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

Persons who respond to the collection of information contained in this form are not required to respond unless the

SEC 1474 (9-02)

form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
|-----------------|--|--------------------------|---|------|---|-----|--|--|------------|-----------------|--|--------------------------------------|--|--|------------|
| Security | Conversion | Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | | of | ber vative rities iired or osed) :. 3, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | · · · | | Derivative Security (Instr. 5) | Derivative Securities Beneficially Owned Following Reported Transaction(s) | Derivative Security: Direct (D) or Indirect | Beneficial |
| | | | | Code | v | (A) | (D) | Date Exercisable | | | Amount or Number of Shares | | | | |
| Stock Option | \$ 3.15 | | | | | | | (1) | 01/17/2025 | Common Stock | 15,000 | | 15,000 | D | |
| Stock Option | \$ 3.65 | | | | | | | (2) | 07/27/2023 | Common Stock | 50,000 | | 50,000 | D | |

Reporting Owners

| | Relationships | | | | | | | | | |
|--|---------------|--------------|-------------------------|-------|--|--|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | | | |
| Naccarato Ben 8302 DUNWOODY PLACE SUITE 250 ATLANTA, GA 30350 | | | Chief Financial Officer | | | | | | | |

Signatures

| /s/Ben Naccaratao | 05/18/2020 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * 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).
- (1) Incentive Stock Option granted 01/17/2019 under the Company's 2017 Stock Option Plan. The Option is for a 6 year period and vests over a 5 year period, at 1/5 increment per year.
- (2) Incentive Stock Option granted 07/27/2017 under the Company's 2017 Stock Option Plan. The Option is for a 6 year period and vests over a 5 year period, at 1/5 increment per year.

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.