# FORM 4

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

OMB APPROVAL					
OMB Number:	3235-02	287			
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nours per response	э	0.5			

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### 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 Ty	pe Response	S)												
1. Name and Address of Reporting Person * Tucker Garland S III		2. Issuer Name and Ticker or Trading Symbol Triangle Capital CORP [TCAP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director							
(Last) (First) (Middle) 3600 GLENWOOD AVENUE, SUITE 104			3. Date of Earliest Transaction (Month/Day/Year) 04/16/2007											
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person					
RALEIGH, NC 27612								Form filed by More than One Reporting Person						
(City	)	(State)	(Zip)	Tab	le I - Non-	Deri	vative Se	curities .	Acqui	red, Dispo	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8) (D) Reported Transaction(s) Form (Instr. 3 and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	V	Amount	(A) or (D)	Price				(I) (Instr. 4)	
Common	Stock		04/16/2007		J		4,311 (1)	D	\$ 0	4,855 (2)			I	By LLC
Common	Stock		04/16/2007		G		1,925 (3)	D	\$ 0	3,018 (2) (4)			I	By LLC
Common	Stock									121,600			D	
Common	Stock									260			I	By Wife
				Derivative Securitie	es Acquire	conta the fo	ained in orm disp sposed of	this for plays a , or Ben	m ar curre	e not req ently valid	uired to re	nformation espond unl ntrol numb	ess	EC 1474 (9- 02)
1 Title of	2	2 Transpatio		e.g., puts, calls, war						itle and	9 Dries of	9. Number of	of 10.	11. Nature
Derivative Conversion Date Execusive or Exercise (Month/Day/Year) any		Execution Da	te, if Transaction Code Year) (Instr. 8)	5. Number of and Exportative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Date hth/Day/Year)		Ame Und Seco	ount of lerlying urities tr. 3 and		Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form of Derivative Security: Direct (D) or Indirect	of Indirect Beneficial Ownership (Instr. 4)	
				Code V	(A) (D)	Date Exer	Ecisable D	xpiration Date	n Title	Amount or Number of Shares				
Repor	ting O	wners												
				Relationships	1									
Reporting	Owner Nan	ne / Address	Director 10% Ow	ner Officer			Other							

### **Signatures**

SUITE 104

Tucker Garland S III

RALEIGH, NC 27612

3600 GLENWOOD AVENUE

/s/ Helen W. Brown - Attorney-in-Fact for Garland S. Tucker III	11/19/2007
**Signature of Reporting Person	Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

X

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Chariman, President, CEO

- (1) Shares represent reporting person's pro rata interest in shares distributed by a limited liability company of which the reporting person is a member.
- (2) Shares beneficially owned represent reporting person's pro rata ownership interest in a limited liability company.
- (3) Shares represent reporting person's pro rata interest in shares gifted by a limited liability company of which the reporting person is a member.
- (4) Includes reporting person's pro rata interest in additional shares acquired by the limited liability company pursuant to the Issuer's dividend reinvestment plan.

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.