FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 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	es)													
1. Name and Address of Reporting Person * SMITH SHERWOOD HUBBARD JR			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 10% Owner					
(Last) (First) (Middle) 3600 GLENWOOD AVENUE, SUITE 104			3. Date of Earliest Transaction (Month/Day/Year) 02/21/2007								r (give title belo		Other (specify be	low)	
(Street) RALEIGH, NC 27612				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 Form filed by More than One Reporting Person				
(City		(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of S (Instr. 3)	ecurity	I	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y	Date, if	Code (Instr.		(A) or (D)	(A) or Disposed or		Beneficia Reported	Amount of Securities neficially Owned Following ported Transaction(s) str. 3 and 4)		Ownership Form: Direct (D)	Beneficial Ownership
						Cod	e V	Amou	(A) or (D)	Price				or Indirect (I) (Instr. 4)	Instr. 4)
Common	Stock	(02/21/2007			P		10,00	0 A	\$ 15	10,000			D	
			Table II - D	Derivative So			con the ired, D	tained i form di Pisposed	in this for splays a c	m are curre	e not req ently valid	uired to re d OMB co	nformation espond unle ntrol numbe	ess	C 1474 (9- 02)
Security	Conversion	3. Transaction Date (Month/Day/Year)	ear) any	4. Transaction Code (Instr. 8)		5. Numl of	oer 6. I and ve (M es d d ,	Date Exe I Expirati onth/Day	rcisable ion Date	7. Ta	7. Title and Amount of Underlying Securities (Instr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code	e V	(A) (I		te ercisable	Expiration Date	Title	Amount or Number of Shares				
Repor	ting O	wners								•	1				- I

Booking Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SMITH SHERWOOD HUBBARD JR 3600 GLENWOOD AVENUE SUITE 104 RALEIGH, NC 27612	X						

Signatures

/s/ Helen W. Brown, Attorney-in-Fact for Sherwood Hubbard Smith, Jr.	02/23/2007
**Signature of Reporting Person	Date

Explanation of Responses:

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

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.