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

OMB APPROVAL					
OMB Number:	3235-0287				
estimated average	ge burden				
ours per respon	se 0.5				

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

1 Name an														
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) 3700 GLENWOOD AVENUE, SUITE 530			3. Date of Earliest Transaction (Month/Day/Year) 05/04/2011							r (give title belo		Other (specify b	elow)	
(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 Acqu					Acquir	ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea	f Code (Instr. 8)	(4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of l	d 5. Amount of Securiti Beneficially Owned F Reported Transaction (Instr. 3 and 4)		Following	()	7. Nature of Indirect Beneficial Ownership
					Code	V	Amount	(A) or (D)	Price	(I)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		05/04/2011		A	1	1,679	A	\$ 0	39,235.8	39		D	
Common	Stock								2	29,088.1	.1		I	By Wife
Reminder: lindirectly.	Report on a	separate line fo	or each class of secu	rities beneficially		•	ne who	respon	nd to t	the colle	ection of in	formation	S	EC 1474 (9-
	Report on a	separate line fo	Table II - D	Derivative Securit	ies Acquire	Perso contai the fo	ined in rm disp posed of	this for ben	rm are currer reficiall	not req	uired to re	formation espond unl ntrol numb	ess	EC 1474 (9- 02)
1. Title of Derivative Security	•	3. Transaction	Table II - D (e 1 3A. Deemed Execution Da (Year) any		ies Acquire arrants, op	Perso contai the for ed, Disp tions, c	ined in rm disp posed of converti- te Exerc xpiration	this for plays a f, or Ben ble securisable n Date	rm are currer reficiall rities) 7. Tit Amo Unde Secur	e not requally valid by Owned tle and ount of erlying	uired to red OMB cor	spond unl	of 10. Owners Form of Derivati Security Direct (or Indire	11. Nature of Indirec Beneficial Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction	Table II - D (e 1 3A. Deemed Execution Da (Year) any	Derivative Securit 2.g., puts, calls, w 4. tte, if Transaction Code	ies Acquire arrants, op 5. Number of Derivative	Perso contai the for ed, Disp tions, c	ined in rm disp posed of converti- te Exerc xpiration	this for plays a f, or Ben ble securisable n Date	rm are currer reficiall rities) 7. Tit Amo Unde	e not requally valid by Owned tle and ount of erlying	8. Price of Derivative Security	9. Number of Derivative Securities	of 10. Owners Form of	11. Na hip of Indi

Paradia Commission (Addison	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SMITH SHERWOOD HUBBARD JR 3700 GLENWOOD AVENUE SUITE 530 RALEIGH, NC 27612	X					

Signatures

/s/ Helen W. Brown, Attorney-in-Fact for Sherwood H. Smith	05/10/2011
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.