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

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

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02)

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 of Type Response	es)											
1. Name and Address of Reporting Person – Goldstein Benjamin S			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			
3700 GLENWOOD	(First) AVENUE,	(Middle) SUITE 530	3. Date of Earliest Transaction (Month/Day/Year) <u>Officer (give title below)</u> Other (speci 12/27/2012							below)		
(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)	Tab	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
(Instr. 3)			2A. Deemed Execution Date, if any	Code (Instr. 8)	ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership o	7. Nature of Indirect Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	licable) 	Ownership (Instr. 4)	
Common Stock		12/27/2012		S		2,701	D	\$ 24.21	21,408 (1)	D		
Common Stock		12/27/2012		Р		2,701	А	\$ 24.33	24,109 <u>(1)</u>	D		

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

SEC 1474 (9-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 control number.

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

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	. Num	ıber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of	f		and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	erivat	tive	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	ecuriti	ies			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				А	cquire	ed			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(/	A) or				4)			0	Direct (D)	
					D	ispose	ed						*	or Indirect	
						f (D)							Transaction(s)	· /	
						nstr. 3	· ·						(Instr. 4)	(Instr. 4)	
					4,	, and \sharp	5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code V	/ (.	A) (D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Goldstein Benjamin S 3700 GLENWOOD AVENUE SUITE 530 RALEIGH, NC 27612	Х							

Signatures

/s/ Helen W. Brown, Attorney-in-Fact for Benjamin S. Goldstein 12/28/2012 Date **Signature of Reporting Person

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) The reported number of shares were sold by the reporting person then purchased by an IRA account directly owned by the reporting person. These reported transactions resulted in no profit to the reporting person and the reporting person remains the direct beneficial owner of all shares sold and purchased in the reported transactions.

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.