FORM 4

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

OMB APPROVAL								
OMB Number:	3235-0287							
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nours per response								

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 Typ	pe Response	es)														
1. Name and Address of Reporting Person * Knox C Robert JR					2. Issuer Name and Ticker or Trading Symbol Triangle Capital CORP [TCAP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 3700 GLENWOOD AVENUE, SUITE 530					3. Date of Earliest Transaction (Month/Day/Year) 06/27/2013						X Officer (give title below) Other (specify below) Principal Accounting Officer					
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)					ear)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
RALEIGH, NC 27612 (City) (State) (Zip)																
(City)		(State)		Zip)	Table I - Non-Derivative Securities Acqu						ired, Disp	osed of, or	Beneficially	Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if) any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Form:	7. Nature of Indirect Beneficial			
					Code		(A) or Amount (D)		Price	(mod. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		06/27/2	013		S	V	3,000	D	\$	47,237			D		
Reminder: I indirectly.	Report on a	separate line f	or each cl	ass of secu	rities beneficially	owned dire	ectly o	or								
							con	tained i	n this	form ar	e not req	uired to re	nformation espond un ntrol numb	less	EC 1474 (9- 02)	
			Т		erivative Securiti .g., puts, calls, wa							l				
1. Title of 2. Derivative Conversion Security (Instr. 3) Price of Derivative Security		3. Transactio Date (Month/Day/	Execution Da Year) any		ate, if Transaction Code (Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and (Mo		ation Date ay/Year) S		,		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	Ownersh y: (Instr. 4) D) ect	
					Code V	(A) (D)		-	Expirat Date	tion Titl	Amount or e Number of Shares					
Repor	ting O	wners														
	o v				Relationshi	ps										
Reporting	Owner Nar	ne / Address	Director	10% Owr	ner Officer			О	ther							
Knox C Robert JR 3700 GLENWOOD AVENUE SUITE 530 RALEIGH, NC 27612			Principal A	.ccountin	g Of	ficer										
Signat	ures															

Explanation of Responses:

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

/s/ Helen W. Brown, Attorney-in-Fact for C. Robert Knox

**Signature of Reporting Person

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

The price reported in Column 4 is a weighted average price. These shares were sold in more than one transaction at prices ranging from \$27.65 to \$27.66, inclusive. The (1) reporting person hereby undertakes to provide to Triangle Capital Corporation, any security holder of Triangle Capital Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

06/28/2013

Date

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.