FORM 4

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

OMB APPR	OVAL
DMB Number:	3235-0287
Estimated average	e burden
ours per respons	e 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

1 Name an															
Print or Type Responses) 1. Name and Address of Reporting Person * SMITH SHERWOOD HUBBARD JR.			2. Issuer Name and Ticker or Trading Symbol Triangle Capital CORP [TCAP]						5	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) 05/25/2016						-	Officer (give title below) Other (specify 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)			Table I - Non-Derivative Securities Acqu						Acquir						
(Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acc (A) or Disposed (D) (Instr. 3, 4 and 5		Disposed of	of Benefici Reported		ficially Owned Following rted Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Code	V	Amount	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		05/25/2016			A		2,721	A	\$ 0	83,152			D	
Common	Stock									:	36,660			I	By spouse
									_						
Reminder: indirectly.	Report on a	separate line fo	or each class of secu				Perso conta the fo	ons who lined in orm dis	this for plays a	m are currei	not requality	uired to re I OMB cor	formation espond un atrol numb	ess	EC 1474 (9- 02)
	Report on a	separate line fo	Table II - D	rities beneficiall	·ities	Acquire	Perso conta the fo	ons who lined in orm dis	this for plays a	m are curre: eficial	not requality	uired to re I OMB cor	spond un	ess	,
	2. Conversion	3. Transaction	Table II - D	perivative Secur	rities warr 5. Se Ad (A D) of (I)	Acquire rants, opt	Persoconta the fo d, Disjons, o 6. Da and E	ons who nined in orm dis posed of converti	this for plays a f, or Bendelble securion isable n Date	eficiallities) 7. Ti Amo Unde	e not requality valid by Owned the and count of earlying	uired to re I OMB cor	espond unl ntrol numb	of 10. Ownersl Form of Derivati Security Direct (lor Indirect)	11. Naturr of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

Portation Community (Addition	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SMITH SHERWOOD HUBBARD JR. 3700 GLENWOOD AVENUE SUITE 530 RALEIGH, NC 27612	X					

Signatures

Harry S. Pangas, attorney-in-fact for Sherwood H. Smith, Jr.	05/27/2016
**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.

