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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#### 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 Type Responses)										
1. Name and Address of Reporting F Poole E. Ashton	2. Issuer Name <b>and</b> 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) 3700 GLENWOOD AVENUE	3. Date of Earliest Transaction (Month/Day/Year) 02/01/2017						X         Officer (give title below)         Other (specify below)           President and CEO			
(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	le I - Non-	Deri	vative Se	ecuritie	s Acqui	red, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		4. Securities Acquir (A) or Disposed of ( (Instr. 3, 4 and 5)		l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)	· · ·
Common Stock	02/01/2017		А		53,500	А	\$ 19.25	219,934 (1)	D	
Common Stock								1,801 (2)	Ι	By spouse (for son)
Common Stock								1,801 (2)	I	By spouse (for daughter)

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

Persons who respond to the collection of informationSEC 1474 (9-contained in this form are not required to respond unless02)the form displays a currently valid OMB control number.

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (a.g., pute calls warrants options convertible securities)

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	f 2.	3. Transaction	3A. Deemed	4.	5. N	Jumber	6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivativ	e Conversion	Date	Execution Date, if	Transaction	1 of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Der	ivative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Sec	urities			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Aco	quired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A)	or			4)			Following	Direct (D)	
					Dis	posed						Reported	or Indirect	
					of (	D)						Transaction(s)	(I)	
					(Ins	str. 3,						(Instr. 4)	(Instr. 4)	
					4, a	nd 5)								
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
							Exercisable	Date		of				
				Code V	(A	) (D)				Shares				

## **Reporting Owners**

Describer Operative Verse (Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Poole E. Ashton 3700 GLENWOOD AVENUE, SUITE 530 RALEIGH, NC 27612	Х		President and CEO				

## Signatures

Harry S. Pangas, attorney-in-fact for E. Ashton Poole	02/03/2017
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \*\* If the form is filed by more than one reporting person see Instruction 4(b)(x) inlations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Includes 1,219 shares of common stock received in 2016 pursuant to Triangle Capital Corporation's Dividend Reinvestment Plan.
- (2) Includes 135 shares of common stock received in 2016 pursuant to Triangle Capital Corporation's Dividend Reinvestment Plan.

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.