FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
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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)

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 and Address of Reporting Person* Fowler R Bryce						2. Issuer Name and Ticker or Trading Symbol Triumph Bancorp, Inc. [TBK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify						
	(FI		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2017									below)			below)	респ у					
SUITE 1700 (Street) DALLAS TX 75251					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)																Person					
		Tab	le I - No	n-Deriv	vative	e Se	curitie	s Ac	quired	, Dis	posed (of, or B	enefici	ally	Owned	l					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.						ar) i	2A. Deem Execution If any (Month/Da	Date,	Code			ities Acqui d Of (D) (Ir		and Securiti Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										v	Amount	ount (A) or (D)		e	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 04/01/							2017				2,267	(1) A	\$0	.00	54,253 ⁽²⁾			D			
		1	able II -								osed of converti				Owned			,	•		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date E Expiratio (Month/D	n Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D S (I	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er							
Employee Stock Options ⁽³⁾	\$25.8	04/01/2017			A		6,716		(4)	(14/01/2027	Common Stock	6,710	5	\$0.00	6,716		D			
Employee Stock	\$15.87								(4)		14/01/2026	Common Stock	9,99	5		9,995		D			

Explanation of Responses:

- 1. Represents shares of restricted common stock of Issuer granted to the reporting person under Issuer's 2014 Omnibus Incentive Plan. One fourth (rounded down to the nearest whole share, as applicable) of such shares shall vest on each of the first four anniversaries of the date of grant.
- 2. Consists of (i) 48,000 shares of common stock beneficially owned by reporting person, and (ii) 6,253 shares of restricted stock of the reporting person subject to future time vesting requirements.
- $3. \ Represents non-qualified stock options of Issuer granted to reporting person under Issuer's 2014\ Omnibus\ Incentive\ Plan.$
- 4. Exercise of the employee stock option is subject to vesting over four years from the date of grant, with one fourth of such options becoming exercisable on each of the first four anniversaries of the date of

Remarks:

/s/ Adam D. Nelson, Attorney-

04/05/2017

** Signature of Reporting Person

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

- * 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.

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 Number.