FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

II	OMB APPRO	VAL
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Trail Justin N						2. Issuer Name and Ticker or Trading Symbol Triumph Bancorp, Inc. [TBK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 12700 PA	ast) (First) (Middle) 2700 PARK CENTRAL DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/31/2017										Officer (give title below)				specify
(Street) DALLAS	· ·			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 Person						
(City)	(St		Zip)		<u></u>															
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				2 E ar) if	2A. Deemed Execution Date,		3. Tra	3.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Co	ode	v	Am	ount	(A) or (D)	Price	Reported Transaction(s (Instr. 3 and 4					
Common	ommon Stock 01.			01/31/201	7				A		4	462 ⁽¹⁾	A	\$0.00(1)	41,749(2)		D			
Common	ommon Stock														32,612		I		By JTHT Enterprises, Ltd. ⁽³⁾	
Common Stock														4,286		I		By spouse ⁽⁴⁾		
Common Stock															350		I		By children UTMA/UGMA accounts ⁽⁵⁾	
		Та	ble II											eneficial ecurities	ly Owned)					
1. Title of Derivative Security (Instr. 3)	ive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any					ransaction Code (Instr.		nber ative ities red sed 3, 4	Expiration Date (Month/Day/Year)			te	Amo Secu Und Deri	tle and ount of urities erlying vative urity (Instr. 3		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code		(A)	(D)	Date Exercisa		ble	Expiration Date	Title	or Number of						

Explanation of Responses:

- 1. Represents shares of common stock of Issuer granted to the reporting person under Issuer's 2014 Omnibus Incentive Plan. All of such shares were fully vested as of the date of grant.
- 2. Consists of (i) 40,761 shares beneficially owned by reporting person, and (ii) 988 shares of restricted stock of the reporting person subject to future time vesting requirements.
- 3. Reporting person exercises voting and dispositive control over these shares and disclaims beneficial ownership of such shares, except to the extent of his pecuniary interest.
- 4. By Equity Trust Company Custodian FBO Tamara Trail IRA. Reporting person disclaims beneficial ownership of these shares.
- 5. Consists of (i) 200 shares of common stock indirectly owned through E*TRADE UTMA/UGMA Account FBO minor daughter Hannah Trail; (ii) 100 shares of common stock indirectly owned through E*TRADE UTMA/UGMA Account FBO minor daughter Robyn Trail; and (iii) 50 shares of common stock indirectly owned through E*TRADE UTMA/UGMA Account FBO minor daughter Charli Trail. Reporting person, as Custodian, exercise voting and dispositive control over these shares and disclaims beneficial ownership of such shares.

Remarks:

/s/ Adam D. Nelson Attorney-

02/02/2017

in-fact

** Signature of Reporting Person

Date

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.