FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-0								
Estimated average burden								
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	Check this box if no longer subjec
\neg	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Sepulveda Carlos M				2. Issuer Name and Ticker or Trading Symbol Triumph Financial, Inc. [TFIN] 3. Date of Earliest Transaction (Month/Day/Year)								neck all ap X Dire	onship of Reportin all applicable) Director		erson(s) to I 10% O	wner		
(Last)	(Fir	est) (N	Middle)			07/03/2023									Officer (give title below)		below)	specify
12700 PARK CENTRAL DRIVE SUITE 1700				4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	5. Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person						
(Street)	S TX	. 7	5251											Forn Pers	n filed by Mo on	re tha	n One Rep	orting
(City)	(St	ate) (Z	Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See									truction or wr	itten pl	lan that is in	ended to
		Table	I - Nor	n-Deriva	tive S	ecur	ities Acc	uired,	Disp	osed of	, or I	Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)				Execution Date,		Transaction Disposed Code (Instr. and 5)		ities Acquired (A d Of (D) (Instr. 3,			Secur Benef Owne Follov	cially d ving	Form (D) o	n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A (D) or)	Price	Repor Trans (Instr.	erted saction(s) : 3 and 4)			
Common Stock 07/03/2					2023			A		897(1)		A	\$ <mark>0</mark> (1) 41	412,242(2)		D	
Deposito	ry Shares ⁽³⁾													5,398		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	s I		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		,	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)	Date Exercisa		Expiration Date	Title	Amo or Nun of Sha	.					

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) 248,516 shares of common stock of Issuer beneficially owned by reporting person, and (ii) 163,726 shares of common stock of Issuer beneficially owned jointly with reporting person's spouse Susan Sepulveda.
- 3. Each Depository Shares represents a 1/40th interest in a share of the Issuer's 7.125% Series C Fixed Rate Non-Cumulative Perpetual Preferred Stock, par value \$0.01 per share. Shares purchased in an underwritten public offering.

Remarks:

/s/ Adam D. Nelson, Attorney-in-fact

07/06/2023

** 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.