FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* HAMADA RICHARD P					2. Issuer Name and Ticker or Trading Symbol Trinity Capital Inc. [TRIN]										ck all app	,		rson(s) to Is	
(Last)	(Fir	st) (N	-	3. Date of Earliest Transaction (Month/Day/Year) 06/12/2024									Office below	er (give title v)		Other (s below)	pecify		
C/O TRINITY CAPITAL INC. 1 N. 1ST STREET, SUITE 302						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person				
(Street) PHOENI	(Street) PHOENIX AZ 85004				Dul	Pulo 10h5 1(a) Transaction Indication									Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													ided to	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Exe if an	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Di		Disposed	Securities Acquired (Aisposed Of (D) (Instr. 3)		A) or , 4 and	Benefic Owned	ies cially Following	Form (D) o	r Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	or P	rice	Transa	Reported Fransaction(s) Instr. 3 and 4)			msu. 4)
Common Stock 06/12/2					2024				A ⁽¹⁾		3,335	A	4	\$ <mark>0</mark>	97	97,070		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	n Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisa Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	per					

Explanation of Responses:

1. Restricted shares issued under the Trinity Capital Inc. 2019 Non-Employee Director Restricted Stock Plan. Such restricted shares shall vest in full on the earlier of (1) June 12, 2025 or (2) the date immediately preceding the next annual meeting of stockholders.

Sarah Stanton is signing on behalf of Mr. Hamada pursuant to the power of attorney dated December 16, 2021, which was previously filed with the Securities and Exchange Commission as an exhibit to the Form 3 Mr. Hamada filed on December 16, 2021

> /s/ Sarah Stanton, on behalf of Richard Hamada

06/14/2024

** 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.