

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
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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

1. Name and Address of Reporting Person* <u>Tarrant Capital Advisors, Inc.</u> (Last) (First) (Middle) C/O TPG CAPITAL, L.P. 301 COMMERCE ST., SUITE 3300 (Street) FORT WORTH TX 76102 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 03/15/2011	3. Issuer Name and Ticker or Trading Symbol <u>TPG Specialty Lending, Inc.</u> [N/A]	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	1,000	I	See Explanation of Responses ⁽¹⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person*
Tarrant Capital Advisors, Inc.
 (Last) (First) (Middle)
 C/O TPG CAPITAL, L.P.
 301 COMMERCE ST., SUITE 3300
 (Street)
 FORT WORTH TX 76102
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
BONDERMAN DAVID
 (Last) (First) (Middle)
 C/O TPG CAPITAL, L.P.
 301 COMMERCE ST., SUITE 3300
 (Street)
 FORT WORTH TX 76102
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
COULTER JAMES G
 (Last) (First) (Middle)
 C/O TPG CAPITAL, L.P.
 301 COMMERCE ST., SUITE 3300
 (Street)

FORT WORTH TX 76102

(City) (State) (Zip)

Explanation of Responses:

1. David Bonderman and James G. Coulter are directors, officers, and the sole stockholders of Tarrant Capital Advisors, Inc. ("Tarrant Capital"). Tarrant Capital is the sole stockholder of Tarrant Advisors, Inc., a Texas corporation ("Tarrant"), which directly holds the 1,000 shares of Common Stock reported herein. Because of the relationship of Messrs. Bonderman and Coulter and Tarrant Capital (together, the "Reporting Persons") to Tarrant, the Reporting Persons may be deemed to beneficially own the shares directly owned by Tarrant. Messrs. Bonderman and Coulter disclaim beneficial ownership of these shares except to the extent of their pecuniary interest therein.

Remarks:

(2) The Reporting Persons are jointly filing this Form 3 pursuant to Rule 16a-3(j) under the Exchange Act. (3) Ronald Cami is signing on behalf of each of Messrs. Bonderman and Coulter pursuant to the authorization and designation letters dated July 1, 2010 which were previously filed with the Securities and Exchange Commission.

/s/ By: Ronald Cami, Vice-
President of Tarrant Capital
Advisors, Inc. (2) 03/15/2011

/s/ By: Ronald Cami, on behalf
of David Bonderman (2)(3) 03/15/2011

/s/ By: Ronald Cami, on behalf
of James G. Coulter (2)(3) 03/15/2011

** 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 5 (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.