

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *      |                                   |             |             | 2. Issuer Name and Ticker or Trading Symbol |  |                    |                             |                           |   |  |                    | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |                |  |                                    |  |
|--|-----------------------------------|-------------|-------------|---|--|--------------------|-----------------------------|---------------------------|---|--|--------------------|---|--|---|----------------|--|------------------------------------|--|
| Burns John                                     |                                   |             |             |   | Tri  | ton                | Inter                       | nationa                   | l L   | td [ T                                     | RTN]               |   |  |   |                |  |                                    |  |
| (Last) (First) (Middle)                        |                                   |             |             |   | 3. Date of Earliest Transaction (MM/DD/YYYY) |                    |                             |                           |   |  |                    |   | Director10% Owner  X Officer (give title below) Other (specify below)  |   |                |  |                                    |  |
|  |                                   |             | ~~~         |   |  |                    |                             | 4 /2                      | 4/2/  | 04.5                                       |                    |   | (  | _ <b>x</b> Officer (gr<br>C <b>FO</b>     | ve title belov | v)Oti  | ner (specify                       | below)   |
| C/O TAL IN                                     |                                   |             |             |   |  |                    |                             | 4/2                       | 4/20  | J17  |                    |   |  |   |                |  |                                    |  |
| INC., 100 M                                    | ANHATT                            | ANVIL       | LE R        | OAD   |  |                    |                             |                           |   |  |                    |   |  |   |                |  |                                    |  |
| -  | (Stree                            | et)         |             |   | 4. If  | `Ame               | endme                       | nt, Date O                | rigir   | nal Filed                                  | d (MM/DI           | D/YYY   | Y) 6   | . Individual o                            | or Joint/G     | roup Filing  | Check Appl                         | icable Line)   |
| PURCHASE                                       | , NY 105                          | 77          |             |   |  |                    |                             |                           |   |  |                    |   |  | X _ Form filed by                         |                | ting Person<br>One Reporting F   | 'erson                             |  |
| (C   | ity) (Stat                        | e) (Zip     | p)          |   |  |                    |                             |                           |   |  |                    |   |  |   |                |  |                                    |  |
|  |                                   |             |             |   |  |                    |                             |                           | •   |  |                    |   |  | icially Owne                              |                |  | 1.                                 |  |
| 1. Title of Security (Instr. 3)                |                                   |             | . Trans. Da | 2A. Deem<br>Execution<br>Date, if an        |  | ion                | 3. Trans. Cod<br>(Instr. 8) |                           | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |  |                    | Fol   | Following Reported Transaction(s)  Ownership Form: Benefic Direct (D)  Ownership Form: Cownership Form: Cown |   |                |  | Beneficial<br>Ownership            |  |
|  |                                   |             |             |   |  |                    |                             | Code                      | V   | Amount                                     | (A) or (D)         | Price   | e  |   |                |  | or Indirect<br>(I) (Instr.<br>4)   | (Instr. 4)   |
| Common Shares 4/24/20                          |                                   |             | 4/24/2017   | 7   |  |                    | S                           |                           | 26,300  | D <b>D</b>                                 | \$30.0             | 02  |  |   | 121,126        | D  |                                    |  |
| Common Shares 4/25/                            |                                   |             | 4/25/2017   | 7   |  |                    | S                           |                           | 3,700   | <u>D</u>                                   | \$30.2             | 22  |  |   | 117,426        | D  |                                    |  |
|  | Tabl                              | le II - Der | ivative     | Securiti                                    | es B   | Benefi             | icially                     | Owned (                   | e <b>.g.,</b>   | puts, c                                    | alls, wa           | rrant   | ts, op   | tions, conver                             | tible secu     | ırities)   |                                    |  |
| 1. Title of Derivate<br>Security<br>(Instr. 3) | ecurity Conversion Date Execution |             |             | n (Instr                                    |  | Acquire<br>Dispose |                             | ve Securities<br>d (A) or |   | 6. Date Exercisable<br>and Expiration Date |                    |   |  | nderlying Derivative<br>security Security |                | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | Ownership<br>Form of<br>Derivative | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |                                   |             |             | Со  | de   | v                  | (A)                         | (D)                       | Dat<br>Exe  | e I<br>ercisable                           | Expiration<br>Date |   | Amour<br>Shares  | nt or Number of                           |                | Transaction(s)<br>(Instr. 4)   |                                    |  |

#### **Explanation of Responses:**

(1) Shares were sold pursuant to a 10b5-1 plan dated December 9, 2016.

#### **Reporting Owners**

| Reporting Owners                  |               |           |         |       |  |  |  |  |
|-----------------------------------|---------------|-----------|---------|-------|--|--|--|--|
| Departing Oxymon Name / Address   | Relationships |           |         |       |  |  |  |  |
| Reporting Owner Name / Address    | Director      | 10% Owner | Officer | Other |  |  |  |  |
| Burns John                        |               |           |         |       |  |  |  |  |
| C/O TAL INTERNATIONAL GROUP, INC. |               |           | CFO     |       |  |  |  |  |
| 100 MANHATTANVILLE ROAD           |               |           | Cro     |       |  |  |  |  |
| PURCHASE, NY 10577                |               |           |         |       |  |  |  |  |

### **Signatures**

Marc Pearlin as attorney-in-fact for John Burns

\*\*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 control number.