FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

|   | OMB APPRO              | OVAL      |  |  |  |  |  |
|---|------------------------|-----------|--|--|--|--|--|
|   | OMB Number:            | 3235-0287 |  |  |  |  |  |
| l | Estimated average burd | en        |  |  |  |  |  |
| l | hours per response:    | 0.5       |  |  |  |  |  |

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

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*  MELOY MATTHEW J  |   |  |   |         |   |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Targa Resources Corp. [TRGP] |        |                                    |                  |                 |   |  |                 |                      |                   | all app<br>Direc  | onship of Reporting<br>all applicable)<br>Director<br>Officer (give title |                      | Person(s) to Issuer  10% Owner                                     |   |
|--|---|--|---|---------|---|--|---|--------|------------------------------------|------------------|-----------------|---|--|-----------------|----------------------|-------------------|---|---|----------------------|--|---|
| (Last) (First) (Middle) 1000 LOUISIANA, SUITE 4300         |   |  |   |         |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/10/2013                     |        |                                    |                  |                 |   |  |                 |                      |                   | belov   | Senior VP, CFO  |                      | Other (specify below) and Treasurer                                |   |
| (Street) HOUSTON TX 77002 (City) (State) (Zip)             |   |  |   |         | 4. If                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |        |                                    |                  |                 |   |  |                 |                      | . Individine)     | ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |                      |  |   |
|  |   | Tabl                                       | e I - Noi                                     | n-Deriv | ative                                   | Se   | ecur  | ritie  | s Acc                              | uired,           | Dis             | posed o   | f, or  | Ben             | eficia               | ally C            | )<br>Wne  | ed  |                      |  |   |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |   |  |   |         |   | Execution ay/Year) if any                                |   |        | cution Date,                       |                  | Transaction   D |   |  |                 |                      | 4 and S<br>B<br>O |   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following             |                      | ship<br>rect<br>lirect<br>4)                                       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|  |   |  |   |         |   | Code   | v   | Amount |                                    | A) or<br>D)      | Price           | , I   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |                 |                      |                   | (Instr. 4)  |   |                      |  |   |
| Common   | )/2013  | 2013                                       |   |         |   | F  |   | 3,022  |                                    | D                | \$79.01         |   | 69,241   |                 | D                    |                   |   |   |                      |  |   |
| Common   | L/2013  | /2013                                      |   |         |   | G  | V   | 839    |                                    | D                | \$0.00          |   | 68,402   |                 | D                    |                   |   |   |                      |  |   |
|  |   | Та   |   |         |   |  |   |        |                                    |                  |                 | sed of,<br>onvertib   |  |                 |                      |                   | ned   |   |                      |  |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | Date,   | 4.<br>Transactior<br>Code (Instr.<br>8) |  |   |        | 6. Date E<br>Expiratio<br>(Month/D | n Dat            |                 | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |  | str. 3          |                      | ivative<br>urity  | 9. Number or<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4)           | Ownersh<br>Form:<br>Direct (D<br>or Indirec<br>(I) (Instr.                | :<br>t (D)<br>lirect | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |
|  |   |  |   |         | Code                                    | v  |   | (A)    |                                    | Date<br>Exercisa |                 | Expiration<br>Date  | Title  | or<br>Nui<br>of | ount<br>nber<br>ares |                   |   |   |                      |  |   |

**Explanation of Responses:** 

Remarks:

/s/ Matthew J. Meloy

12/12/2013

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.