FORM 4

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

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

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 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 ar								-	1				
1. Name and Address of Reporting Person *- CHOW JOSEPH W			2. Issuer Name and Ticker or Trading Symbol HERCULES TECHNOLOGY GROWTH CAPITAL INC [HTGC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director						
(Last) (First) (Middle) 169 BUCKMINSTER ROAD			3. Date of Earliest Transaction (Month/Day/Year) 02/12/2007										
(Street) BROOKLINE, MA 02445			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City		(State)	(Zip)	Т	able I - No	1-Derivat	ve Securitie	ccurities Acquired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	(Instr. 8)	(A)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				,	Code	V An	ount (A) or (D)	Price		c		or Indirect (I) (Instr. 4)	(Instr. 4)
Common value	Stock \$0.	001 par	02/12/2007		P	5,0	000 A	\$ 13.9	26,516			D	
										ction of inf			
				Derivative Securit		the form	ed in this fo displays a ed of, or Be	orm ar a curre eneficia	ently valid ally Owned	OMB con	spond unle	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	an SA. Deemed Execution Data any	Derivative Securite.g., puts, calls, w 4. te, if Transaction Code Year) (Instr. 8)	arrants, op 5.	ed, Dispositions, con 6. Date Eand Expire	ed of, or Be vertible sectors and the control of th	eneficia urities 7. An Un Sec (In 4)	ently valid ally Owned	8. Price of	spond unle trol numbe	of 10. Owners Form of Security Direct (or Indire	11. Natur of Indire Benefici Owners! (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
CHOW JOSEPH W 169 BUCKMINSTER ROAD BROOKLINE, MA 02445	X				

Signatures

/s/Scott Harvey, Attorney-in-fact for Joseph W. Chow	02/13/2007
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.