#### 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

(Print or Ty	pe Response	S)										1					
	nd Address of ez Manuel	f Reporting Po A	erson*	2. Issuer Nar HERCULE CAPITAL	S T	ECH	[NO]	LOC			[	_X_ Direc	tor er (give title bel	eck all appli	cable) 10% O Other (		ow)
	RCULES 1		(Middle) OGY GROWTH AVE, SUITE	3. Date of Ear 05/03/2013	liest '	Trans	saction	n (M	onth/Day	/Year)			P	resident & C	LEU_		
PALO A	LTO, CA	(Street) 94301		4. If Amendm	ent, I	Date (	Origin	nal Fi	iled(Month	n/Day/Year	)	_X_ Form fil	ual or Joint/O led by One Repo led by More than	orting Person			Line)
(City		(State)	(Zip)		Tal	ble I -	- Non	-Der	ivative S	Securitie	es Acqu	ıired, Disp	osed of, or l	Beneficially	Own	ed	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y	e, if	3. Tr Code (Instr	•	tion	· /	Disposed , 4 and 5	of (D)	Beneficia	nt of Securitally Owned I Transaction and 4)	Following	Forn Dire	nership onership onership of the ct (D) of t	eneficial wnership
						Со	de	V	Amount	(A) or (D)	Price				or In (I) (Inst	ì	nstr. 4)
Common	Stock \$0.	001	05/03/2013			N	Л		97,400	A	\$ 12.14	1,820,0	06		D		
Common	Stock \$0.	001	05/03/2013			F	Ţ.		92,278	D	\$ 13.4	1,727,7	28		D		
Reminder:	Report on a s	separate line f		Derivative Sec	uritie	es Ac	quire	Pers cont the f	ons wh ained in form dis	o responding this formula of the second seco	orm ar a curre eneficia	e not requently valid	ction of inf uired to res OMB conf	spond unle		SEC 14	174 (9-02)
1. Title of	2	3. Transactio		(e.g., puts, calls	_	<u>rrant</u> 5.	s, op		, convert ate Exerc			itle and	8 Price of	9. Number	of 1	0.	11. Naturo
Derivative Security	Conversion or Exercise Price of Derivative Security	3. Transactic Date (Month/Day.	Year) Execution Da	te, if Transacti Code Year) (Instr. 8)	ion M		ative ities ared sed 3,	and	ate Exerc Expirationth/Day/	on Date	An Un Sec	nount of derlying curities str. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	y E E E E E E E E E E E E E E E E E E E	O. Dwnership Form of Derivative Security: Direct (D) or Indirect I) Instr. 4)	of Indirect Beneficial Ownershi (Instr. 4)
				Code	V	(A)	(D)	Date Exe	e rcisable	Expiration Date	on Tit	Amount or Number of Shares					

## **Reporting Owners**

		Rel	lationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Henriquez Manuel A C/O HERCULES TECHNOLOGY GROWTH CAPITAL 400 HAMILTON AVE, SUITE 310 PALO ALTO, CA 94301	X		President & CEO	

#### **Signatures**

/s/ K. Nicholas Martitsch, Attorney-in-Fact for Manuel Henriquez	05/06/2013	.3	3																	,									;	3	3				3	3	3	3	3	3	3	3	3	,					;	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	13	1	1	)1	01	0	20	2	/2	5/	5	6	) (	0	<b>'</b> (	/(	/	5/	5/	5,	5,	5/	5/	5/	5/	5/	5/	5/	/	/(	/(	/(	/(	/(	/(	0	0	0	0	0	)(	)(	16	6	6	6	6	6	6	6	6	6	6	6/	5/	5/	5/
-*Signature of Reporting Person	Date		_						-1	-	 	!	!	 -1	 	 	 !	!	 _,	_,	_,	 = 0	-1	= 0	= 0	= 0	-	 					 	_,										_,	 _,	_,	_,	_,																														е	ite	at	<b>D</b> a	)a	Г	I																	]	]		I	Ι	Ι	Ι	Б	D	Da	Da	Da	Эa	a	a	a	a	a	a	at	at	at	ate	ate	ate	ate

### **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.