FORM 4	ŀ
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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 Per Henriquez Manuel A	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_ Director10% Owner X_ Officer (give title below)Other (specify below)			
(Last) (First) C/O HERCULES TECHNOLO CAPITAL,, 400 HAMILTON 2 310		3. Date of Earliest Transaction (Month/Day/Year) 12/30/2013						President & C	EO	
(Street) PALO ALTO, CA 94301	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)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							Owned	
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	or	Price		(I) (Instr. 4)	
Common Stock	12/30/2013		F		968 <mark>(1)</mark>	D	\$ 16.47	1,736,416	D	

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

Persons who respond to the collection of information SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of				4.	5.		6. Date Exer					9. Number of		11. Nature				
Derivative	Conversion	Date	Execution Date, if	Transaction	Nu	nber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect				
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day/Year)		(Month/Day/Year)		(Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	ivative	· · · · · ·		5		Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership		
	Derivative				Sec	urities			((Instr. 3 and			Owned	Security:	(Instr. 4)		
	Security				Aco	quired			4)			Following	Direct (D)					
					(A)	or						Reported	or Indirect					
					Dis	sposed						Transaction(s)	(I)					
					of (D)						(Instr. 4)	(Instr. 4)					
					(Ins	str. 3,												
					4, a	nd 5)												
										Amount								
							Data	Emination		or								
							Date Exercisable	Expiration	Title	Number								
							Exercisable	Date		of								
				Code V	(A	(D)				Shares								

Reporting Owners

	Relationships						
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	Х		President & CEO				

Signatures

/s/ Michael Penney, Attorney-in-Fact for Manuel Henriquez	12/31/2013
**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).
- (1) Represents shares of common stock withheld to pay taxes applicable to the vesting of restricted stock on December 30, 2013.

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.