# FORM 4

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

OMB APPROVAL
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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).

#### 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 Type Responses)  1. Name and Address of Reporting Person*  Grace Melanie				2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O HERCULES CAPITAL INC., 400 HAMILTON AVENUE SUITE 310				3. Date of Earliest Transaction (Month/Day/Year) 01/31/2020						X Officer (give title below) Other (specify below)  General Counsel & CCO					
(Street) PALO ALTO, CA 94301				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year			(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)			d of (D)	Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	Beneficial		
			(Month/Day/Year)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	ina 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Restricted Stock Units		01/31/2020		]	D		5,154 (1)	D	\$ 14.41	53,926 (2)		D			
Common Stock		01/31/2020			A		5,154 (3)	A	\$ 14.41	35,938		D			
Common Stock		01/31/2020			F		1,970 (4)	D	\$ 14.41	33,968	3,968		D		
Reminder:	Report on a s	separate line fo		Derivative Securi	ties Ac	quire	Pers cont the f	ons whained if	no responding this for this for Book or Book o	orm are a curre eneficial	not requesting ntly valid	ction of inf uired to res OMB con	spond unle	ess	1474 (9-02)
1. Title of	2.	3. Transaction		e.g., puts, calls, w	5.	is, opi		, conver ate Exer			itle and	8. Price of	9. Number	of 10.	11. Nature
	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Y	Year) Execution Da	Transaction Code (Instr. 8)	Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		and Expiration Date (Month/Day/Year)		Amo Und Secu	ount of erlying urities tr. 3 and	Derivative Security (Instr. 5)		Owners Form o Derivat Securit Direct ( or India	chip of Indirect Beneficial Ownership: (Instr. 4)	
				Code V	(A)	(D)	Date Exer	cisable	Expirati Date	on Title	Amount or Number of Shares				

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Grace Melanie C/O HERCULES CAPITAL INC. 400 HAMILTON AVENUE SUITE 310 PALO ALTO, CA 94301			General Counsel & CCO			

### **Signatures**

/s/ /Melanie Grace	02/04/2020			
**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 vested restricted stock units and dividend equivalent shares converted to Hercules Capital, Inc. common stock on January 31, 2020.
- (2) Each restricted stock unit represents a contingent right to receive one share of Hercules Capital, Inc. stock.
- (3) Represents Hercules, Inc. common stock received from vested restricted stock units and dividend equivalent shares on January 31, 2020.
- (4) Represents Hercules, Inc. common stock withheld to pay taxes applicable to the vesting of restricted stock units and dividend equivalent shares on January 31, 2020.

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.