# 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 Ty	pe Response	s)																	
1. Name and Address of Reporting Person * Henriquez Manuel A				2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]								1		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) C/O HERCULES CAPITAL, INC., 400 HAMILTON AVENUE SUITE 310					3. Date of Earliest Transaction (Month/Day/Year) 01/24/2017								X Officer (give title below) Other (specify below)  President & Description of the control of th						
(Street) PALO ALTO, CA 94301				4. If Amendment, Date Original Filed(Month/Day/Year)								/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	(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
(Instr. 3)			2. Transaction Date (Month/Day/Year)	Exect	2A. Deemed Execution Date, any (Month/Day/Yea		(Instr. 8)		tion	(A) or Disposed of (Instr. 3, 4 and 5)			Beneficia Reported	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
							Со	Code		Amou	-	nt (A) or (D)		:			or Indirect (I) (Instr. 4)	(Instr. 4)	
Restricted Stock Units 01/24/2017						A	1		351,80 (1) (2)		A	\$ 0	351,86	51,865		D			
	r		or each class of secur	Deriva	ative Secu	uritie	es Acc	quire	Pers cont the f	ons what in the constant of th	no renth	is for ys a c r Bene	m are curre	not requesting ntly valid	OMB conf	ormation spond unle rol numbe	ss	1474 (9-02)	
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da	nte, if	Code	5 ion N c I S A ( I I c C ( )	5.		6. D and	ate Exer Expirati	te Exercisable xpiration Date th/Day/Year)		7. T Ame Und Secu	itle and ount of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	Beneficia Ownershi (Instr. 4)	
					Code	V	(A)		Date Exe	cisable		iration e	Title	Amount or Number of Shares					

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Henriquez Manuel A C/O HERCULES CAPITAL, INC. 400 HAMILTON AVENUE SUITE 310 PALO ALTO, CA 94301	X		President & Dresident & President & Presid					

# **Signatures**

/s/Melanie Grace, Attorney-in-Fact for Manuel Henriquez	01/26/2017
-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) Each restricted stock unit represents a contingent right to receive one share of Hercules Capital, Inc. stock.

Issuer, (ii) dies or becomes disabled or (iii) there is a change in control of the Issuer.

The restricted stock units vest one-third on January 24, 2018 and the remaining two-thirds vest quarterly in equal amounts over the following two years. Vested shares will (2) be delivered to reporting person as soon as reasonably practicable on the earlier of (a) January 24, 2021 and (b) the date (i) reporting person separates from service from

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.