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. 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) 08/21/2017						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)			y/Year)	2A. Deemed Execution Date, if	Code (Instr. 8)		4. Securities Acquirec (A) or Disposed of (D (Instr. 3, 4 and 5)			D) Beneficially Owned I Reported Transaction		Following n(s)	Form:	7. Nature of Indirect Beneficial		
					(Month/Day/Year)	Code	v	Amoun	(A) or t (D)	Price	(Instr. 3 a	nstr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Restricted Stock Units 08/21/2			08/21/201	17		A		529	A S	\$ 12.92	22,582	(1)		D		
				(e.	erivative Securit g., puts, calls, wa	arrants, op	tions	, conver	tible secu	rities)						
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative		3A. Do Execu	eemed tion Date	g., puts, calls, wa 4. c, if Transaction Code ear) (Instr. 8)	ies Acquire arrants, op 5. Number of Derivative Securities	cont the f ed, Di tions 6. D and	ained in form dis	n this for splays a of, or Ben tible secu- cisable on Date	rm are current neficially rities) 7. Titi Amou Under Secur (Instr.	not required to the total requirement of the total representation of the total requirement of th	OMB conf	9. Number of Derivative Securities Beneficially Owned	f 10. Ownersh Form of Derivati Security	ve Ownershi : (Instr. 4)	
	Security					Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		4		4)			Following Reported Transaction(s) (Instr. 4)	Direct (I or Indire (I) (Instr. 4)	ct	
					Code V	(A) (D)	Date Exer		Expiration Date	n Title	Amount or Number of Shares					
Repor	ting O	wners														
						Relation	ships									
Rep	orting Own	er Name / Add	Director	10% Officer						20						

Officer

General Counsel & Dong; CCO

Other

Director

Owner

PALO ALTO, CA 94301 **Signatures**

Grace Melanie

/s/Melanie Grace	08/22/2017				
**Signature of Reporting Person	Date				

C/O HERCULES CAPITAL INC.

400 HAMILTON AVENUE SUITE 310

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).
- Includes additional Dividend Shares relating to deemed reinvested dividend equivalent rights that accrued on Restricted Stock Units (RSUs) previously granted. Such
- (1) additional Dividend Shares are in the form of additional RSUs vest and are settled at the same time as the RSUs in respect of which the dividend equivalent rights accrued. Each such additional Dividend Share RSU is the economic equivalent of one share of Hercules Capital, Inc. common stock.

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.