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)																
Name and Address of Reporting Person* Fallon Thomas J					2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director					
(Last) (First) (Middle) C/O HERCULES CAPITAL, INC., 400 HAMILTON AVENUE SUITE 310					3. Date of Earliest Transaction (Month/Day/Year) 03/12/2018							Office	er (give title belo	ow)	Other (spe	cify belo	w)	
PALO ALTO, CA 94301				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Exec any		n Date, if		(Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ant of Securities ally Owned Following d Transaction(s)		Form:	ship of B	7. Nature of Indirect Beneficial
				(Moi	nth/Day/Y	Y ear)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	nstr. 3 and 4)		Oirect (or India (I) (Instr. 4	rect (I	wnership nstr. 4)
Common Stock 03/12/2018					A			42 (1)	1 /	\$ 12.27	31,916		D					
			Table II -					quire	the f	orm di	splays a of, or Ber	curre neficial		OMB con	spond unle trol numbe			
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Dany	l Pate, if	4. Transaction Code (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Own Form Der Sec Dire or I	nership n of ivative arity: ect (D) ndirect tr. 4)	Beneficia Ownersh (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	e rcisable	Expiratio Date	Title	Amount or Number of Shares					
Repor	ting O	wners																

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fallon Thomas J C/O HERCULES CAPITAL, INC. 400 HAMILTON AVENUE SUITE 310 PALO ALTO, CA 94301	X					

Signatures

/s/Melanie Grace, Attorney in Fact for Thomas A. Fallon	03/14/2018		
**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) Shares acquired through the Hercules Capital, Inc. Dividend Reinvestment Plan.

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.