

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

OMB APPROVAL				
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INITIAL STATEMENT OF 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

(Last) (First) (Middle) C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON AVENUE, SUITE 310 (Street) PALO ALTO, CA 94301 (City) (State) (Corporate Controller (A Relationship of Reporting Person(s) to Issuer (Check all applicable) (City other (specify below) (A Individual or Joint/Group Filing(A Applicable Line) (A Polica (State) (City)	(Print or Type Responses)							
(Last) (First) (Middle) C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON AVENUE, SUITE 310 (Street) (Street) (Street) (City) (State) (Zip)	1 5	Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol HERCULES TECHNOLOGY GROWTH CAPITAL INC [HTGC]				
PALO ALTO, CA 94301 Corporate Controller Corporate Controller Corporate Controller Corporate Controller Corporate Controller Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting I City) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security (Instr. 4) 2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 147 Persons who respond to the collection of information contained in this form are not required to respond	C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON	12/03/2014		Issuer (Check all applicable) Director X Officer (give title Other (specify			, 5	
1. Title of Security (Instr. 4) 2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 147 Persons who respond to the collection of information contained in this form are not required to respond	` ,				,	Applicable I _X_ Form fi		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 147	(City) (State) (Zip)	(Zip) Table I - Non-Derivative Securities Beneficially Owned						
Persons who respond to the collection of information contained in this form are not required to respond	1	Beneficially Owned For (Instr. 4) (D		Form: Direct (D) or Indirect I)	*			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)	Persons who respond unless the form displa	to the collection	n of informationalid onto	on contained in the rol number.		·		
(Instr. 4) and Expiration Date (Month/Day/Year) and Expiration Date (Month/Day/Year) Security (Instr. 4) Securities Underlying Derivative Price of Derivative (Instr. 5) Comparison of Derivative Security: Direct (Instr. 5)	(Instr. 4) and	Expiration Date Securities U Security			or Exercise Price of Derivative	Form of Derivative Security: Direct	(Instr. 5)	
Date Exercisable Expiration Date Title Shares Security (D) or Indirect (I) (Instr. 5)			Title Tilloui	at or Number of	(I)	(I)		

Reporting Owners

	Relationships			
Reporting Owner Name / Address		10% Owner	Officer	Other
Olson Andrew C/O HERCULES TECHNOLOGY GROWTH CAPITAL 400 HAMILTON AVENUE, SUITE 310 PALO ALTO, CA 94301			Corporate Controller	

Signatures

/s/Andrew Olson	12/05/2014
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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).

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.