FORM 4	ŀ
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### 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

1. Name and Address of Reporting Per Henriquez Manuel A	2. Issuer Name an HERCULES T CAPITAL INC	ECHNOI	LOG	0.		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <u>X</u> _Director <u>10%</u> Owner <u>Check (specify below)</u> <u>Other (specify below)</u>				
(Last) (First) C/O HERCULES TECHNOLO CAPITAL,, 400 HAMILTON A 310		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2015						President & C	EO	
(Street) PALO ALTO, CA 94301	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								
(Instr. 3) Date (Month/Day/Year) a		Execution Date, if		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form: Of Indirect Beneficia	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	*
Common Stock	02/09/2015		F		1,893 ( <u>1</u> )	D	\$ 15.49	1,730,974	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of			3A. Deemed	4.	5.			6. Date Exer					9. Number of		11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	umb	er	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of	f		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	eriva	tive			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Securities (		(Instr. 3 and			Owned	Security:	(Instr. 4)		
	Security				Α	.cquii	red			4)			Following	Direct (D)	
					(A	A) or							Reported	or Indirect	
					Disposed		sed						Transaction(s)	(I)	
					of (D)								(Instr. 4)	(Instr. 4)	
					(Instr. 3,										
					4,	4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code V	/ (.	A)	(D)				Shares				

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Henriquez Manuel A C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON AVE, SUITE 310 PALO ALTO, CA 94301	Х		President & CEO				

## Signatures

/s/ Michael L. Butler, Attorney-in-Fact for Manuel Henriquez 02/10/2015

# **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 shares of common stock withheld to pay taxes applicable to the vesting of restricted stock on February 9, 2015.

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.