

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

| OMB APPROVAL | | | | |
|--------------------------|-----------|--|--|--|
| OMB Number: | 3235-0104 | | | |
| Estimated average burden | | | | |
| nours per response | e 0.5 | | | |

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

| (Print or Type Responses) | | | | | | | | |
|---|--|--------------------|-----------------|---|---|---|---|--|
| Name and Address of Reporting Person * Lyons Susanne D | Statement (Month/Day/Year) | | | 3. Issuer Name and Ticker or Trading Symbol HERCULES TECHNOLOGY GROWTH CAPITAL INC [HTGC] | | | | |
| (Last) (First) (Middle) C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON AVENUE, SUITE 310 | | | Issuer (Check a | Issuer (Check all applicable) X_Director | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| (Street) PALO ALTO, CA 94301 | | | | below) | below) | Applicable I _X_ Form fi | lual or Joint/Group Filing(Check Line) led by One Reporting Person led by More than One Reporting Person | |
| (City) (State) (Zip) | 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) 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | ct Beneficial Ownership | | | |
| 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 the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | |
| (Instr. 4) | | | • | Price of Derivative | 5. Ownership Form of Derivative Security: Direct | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | , | (D) or Indirect (I) (Instr. 5) | | |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | | 10% Owner | Officer | Other | | |
| Lyons Susanne D C/O HERCULES TECHNOLOGY GROWTH CAPITAL 400 HAMILTON AVENUE, SUITE 310 PALO ALTO, CA 94301 | X | | | | | |

Signatures

| /s/Susanne D. Lyons | 03/10/2015 |
|---------------------------------|------------|
| **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.