FORM 4	ŀ
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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 Pe Baron Jessica T	2. Issuer Name an HERCULES T CAPITAL INC	ECHNO	LOC			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_Officer (give title below) (Check all applicable) 0ther (specify below)					
(Last) (First) C/O HERCULES TECHNOLO CAPITAL,, 400 HAMILTON 310		3. Date of Earliest 06/04/2015	Transactio	n (M	onth/Day/	Year)	CFO				
(Street) PALO ALTO,, CA 94301	4. If Amendment, 1	Date Origin	nal Fi	led(Month/	Day/Year	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm 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)	2A. Deemed Execution Date, if any (Month/Day/Year)		ction	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: 0f Indire Benefici	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	06/04/2015		F		425 <u>(1)</u>	D	\$ 12.73	98,543	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 S contained in this form are not required to respond unless

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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, cans, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on	Number		and Expiration Date Amo		Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/		/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative				Securities (Instr		Beneficially	Derivative	Ownership
	Derivative					Secur		s		(Instr. 3 and				Security:	(Instr. 4)
	Security					Acqu	Acquired		4)		0	Direct (D)			
						(A) 0						1	or Indirect		
						Disposed							Transaction(s)		
						· · · ·	f(D)					(Instr. 4)	(Instr. 4)		
							nstr. 3,								
						4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Dute		of				
				Code	V	(A)	(D)				Shares				

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Baron Jessica T C/O HERCULES TECHNOLOGY GROWTH CAPITAL, 400 HAMILTON AVE., SUITE 310 PALO ALTO,, CA 94301			CFO			

## Signatures

/s/ Ben Bang, Attorney-in-Fact for Jessica Baron

06/05/2015

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) Represents shares of common stock withheld to pay taxes applicable to the vesting of restricted stock on June 4, 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.