## FORM 4

# 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)												
1. Name and Address of Reporting Person* Grace Melanie				2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O HERCULES CAPITAL INC., 400 HAMILTON AVENUE SUITE 310				3. Date of Earliest Transaction (Month/Day/Year) 08/17/2020						X Officer (give title below) Other (specify below)  General Counsel & CCO				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person					
PALO A	LTO, CA	94301 (State)	(Zip)								•			
		1	Table I - Non-Derivative Securities Acqui					•	, , , ,					
(Instr. 3)		2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Restricte	d Stock Uı	nits	08/17/2020		A		1,329 (1)	Δ	\$ 11.48	55,590			D	
Restricted Stock Units		08/17/2020		F		25 (2)		\$ 11.48	55,565		D			
Restricted Stock Units		08/17/2020		D		112 (3)		\$ 11.48	55,453			D		
Common Stock		08/17/2020		A		112 (4)		\$ 11.48	35,034			D		
Common Stock			08/17/2020		F		43 (5)	D	\$ 11.48	34,991			D	
Reminder:	Report on a s	separate line fo		Derivative Securiti	es Acquire	Pers cont the f	ons who	respo this fo plays a	orm are currer	not reqเ ntly valid	ction of inf ired to res OMB conf	spond unle	ess	1474 (9-02)
1. Title of	2.	3. Transaction		e.g., puts, calls, wa	irrants, op 5.					tle and	8. Price of	0 Number	of 10.	11. Natu
Derivative	Conversion	Date Execution D (Month/Day/Year) any		te, if Transaction Code (Instr. 8)		and (Mo	ate Exercisable Expiration Date nth/Day/Year)		Amo Unde Secu	ount of erlying rities r. 3 and	nt of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir	hip of Indire Benefici Ownersh (Instr. 4)  ect
				Code V	(A) (D)	Date Exer		Expiratio Date	Title	or Number of Shares				

### **Reporting Owners**

	Relationships			
	Director	10% Owner	Officer	Other
Reporting Owner Name / Address				

Grace Melanie C/O HERCULES CAPITAL INC. 400 HAMILTON AVENUE SUITE 310 PALO ALTO, CA 94301  General Counsel & CCO
--

#### **Signatures**

/s//Melanie Grace	08/19/2020
**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) Represents vested dividend equivalent shares issued on August 17, 2020.
- (2) Represents dividend equivalent shares withheld to pay taxes applicable to the vesting of deferred dividend equivalent shares on August 17, 2020.
- (3) Represents released dividend equivalent shares converted to Hercules Capital, Inc. common stock on August 17, 2020.
- (4) Represents Hercules Capital, Inc. common stock received from released vested dividend equivalent shares on August 17, 2020.
- (5) Represents Hercules, Inc. common stock withheld to pay taxes applicable to the vesting of released dividend equivalent shares on August 17,

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.