

# 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

2. Date of Event Requiring Statement (Month/Day/Year)			3. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]							
0770172	4. Relationship Issuer (Che			(Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)				
			Officer (give title below)	e Other (specibelow)	Applicable I  _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Beneficially Owned									
	2. Amount of Securities Beneficially Owned (Instr. 4)			Form: Direct (D) or Indirect (I)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
	0			D						
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02)  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 Reneficially Owned & g. puts, calls, warrants, ontions, convertible securities)										
and Expiration  Month/Day/Yea  Date	on Date  Expiration	Securities Universities Universities University (Instr. 4)  Title Amou	nderlying Derivativ	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
	of securities a cur ve Securities 2. Date Exprand Expiratio (Month/Day/Yea	Statement (Month/D 07/01/2021  2. Ba (In oto the collection olays a currently value e Securities Beneficial 2. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration	Statement (Month/Day/Year)  07/01/2021  Table 1  2. Amount of Se Beneficially Owned (Instr. 4)  0  of securities beneficially owned directly of the collection of information of	Statement (Month/Day/Year)  07/01/2021  4. Relationship of Issuer (Check X_Director Officer (give titl below)  2. Amount of Securities Beneficially Owned (Instr. 4)  0  of securities beneficially owned directly or indirectly. Ind to the collection of information contained in tolays a currently valid OMB control number.  Te Securities Beneficially Owned (e.g., puts, calls, warre)  2. Date Expiration Date (Month/Day/Year)  3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Date Expiration  Amount or Number of	Statement (Month/Day/Year)  07/01/2021  Hercules Capital, Inc. [HTGO 4. Relationship of Reporting Person Issuer  (Check all applicable)  X_Director Officer (give title below)  Table I - Non-Derivative Securities  2. Amount of Securities Beneficially Owned (Instr. 4)  3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)  0  D  of securities beneficially owned directly or indirectly.  Ind to the collection of information contained in this form are no plays a currently valid OMB control number.  Securities Beneficially Owned (e.g., puts, calls, warrants, options, contained and Expiration Date (Month/Day/Year)  3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Amount or Number of  Amount or Number of	Hercules Capital, Inc. [HTGC]				

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
Loo Wade C/O HERCULES CAPITAL, INC. 400 HAMILTON AVENUE, SUITE 310 PALO ALTO, CA 94301	X				

# **Signatures**

/s /Melanie Grace, Attorney-in-Fact for Wade Loo		07/06/2021
**Signature of Reporting Person		Date

# **Explanation of Responses:**

- \* 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.