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 Bluestein Scott	2. Issuer Name ar Hercules Capita			0,	bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) C/O HERCULES CAPITAL JAMES AVENUE, SUITE 7	3. Date of Earliest Transaction (Month/Day/Year) 10/31/2021						X Officer (give title below) Other (specify below) Chief Executive Officer				
(Street) BOSTON, MA 02116	4. If Amendment, I	Date Origin	al Fi	led(Month/I	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									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Form: B	Beneficial	
			Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	× /	Ownership (Instr. 4)	
Restricted Stock Units	10/31/2021		D		24,630 (1)	D	\$ 17.67	155,353	D		
Common Stock	10/31/2021		А		24,630 (2)	А	\$ 17.67	936,377	D		
Common Stock	10/31/2021		F		10,924 (<u>3</u>)	D	\$ 17.67	925,453	D		

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

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

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	4	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n l	Numb	er	and Expiration	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	1	Derivative				Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				5	Securities				(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security				1	Acqui	red			4)			Following	Direct (D)	
					((A) or							Reported	or Indirect	
					1	Dispo	sed						Transaction(s)	(I)	
					0	of (D)							(Instr. 4)	(Instr. 4)	
					(Instr. 3,										
					4, and 5)		5)								
											Amount				
											or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Bluestein Scott C/O HERCULES CAPITAL, INC. 31 ST. JAMES AVENUE, SUITE 790 BOSTON, MA 02116			Chief Executive Officer					

Signatures

**Signature of Reporting Person

11/02/2021

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 restricted stock and dividend equivalent shares converted to Hercules Capital, Inc. common stock on October 31, 2021.
- (2) Represents Hercules, Inc. common stock received from vested restricted stock units and dividend equivalent shares on October 31, 2021.
- (3) Represents Hercules, Inc. common stock withheld to pay taxes applicable to the vesting of restricted stock units and dividend equivalent shares on October 31, 2021.

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.