FORM 4

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

OMB APPROVAL
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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).

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

				2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]							1	:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
				3. Date of Earliest Transaction (Month/Day/Year) 01/09/2018							X Officer (give title below) Other (specify below) President & Description of the Company of the						
				4. If Amendment, Date Original Filed(Month/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)		T	able I	- Non	-Dei	rivative S	Secu	rities .	Acqui	red, Dispe	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if Cany (I		Cod (Ins	3. Transaction 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 B	Beneficial				
				(Month/Da	iy/Year		ode	V	Amour		(A) or (D)	Price	(Instr. 3 a	,		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		01/09/2018			1	A		230,12 (1)	25 A	A \$	3.04	2,086,634		D		
Restricted Stock Units 01/09/2018				1	A		230,12 (2) (3)	25 _A	4 \$	3.04	615,201		D				
Reminder:	Report on a s	separate line fo		Derivative	Securit	ties Ac	equire	Pers cont the t	sons whatained in form dis	no re n thi splay	is fori ys a c r Bene	m are curren	not requ itly valid	ction of inf uired to res OMB conf	spond unle	ess	1474 (9-02)
1. Title of	2.	3. Transactio		(e.g., puts, o	calls, w	arran 5.	ts, op		, conver ate Exer				tle and	8. Price of	9. Number	of 10.	11. Natur
	Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year the of rivative	/Day/Year) any	tte, if Transaction Code Year) (Instr. 8)		Num of	vative rities ired r osed)	and	Expiration Expiration (Conth/Day/	on D	ate	Amo Unde Secu	unt of erlying rities r. 3 and	unt of Derivative Securities Derivative Securities Derivative Securities Derivative Securities		Ownership Form of Derivative Security: Direct (D) or Indirect	hip of Indired Beneficial Ownersh (Instr. 4)
					Code	le V	(A)	(D)	Date		Expi	iration	Title	Amount or Number of Shares			

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Henriquez Manuel A C/O HERCULES CAPITAL, INC. 400 HAMILTON AVENUE SUITE 310 PALO ALTO, CA 94301	X		President & CEO				

Signatures

	/s/Melanie Gra	ace, Attorney-in-Fact for Manuel Henriquez		01/12/2018
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**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) Restricted stock issued as a grant pursuant to the Amended and Restated Equity Incentive Plan and subject to forfeiture restrictions of one-third vesting on January 9, 2019 followed by quarterly vesting over the following 24 months.
- (2) Each restricted stock unit represents a contingent right to receive one share of Hercules Capital, Inc. stock.
- The restricted stock units vest one-third on January 09, 2019 and the remaining two-thirds vest quarterly in equal amounts over the following two years. Vested shares will (3) be delivered to reporting person as soon as reasonably practicable on the earlier of (a) January 09, 2022 and (b) the date (i) reporting person separates from service from Issuer, (ii) dies or becomes disabled or (iii) there is a change in control of the Issuer.

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.