Edgar Filing: Hercules Capital, Inc. - Form 4

Hercules Cap	ital, Inc.												
Form 4 March 14, 20	17												
	Л									OMB AF	PROVAL		
					S AND EXCHANGE COMMISSION ton, D.C. 20549					OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATI 5. 5. Filed p s Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								January 31 2005 Estimated average burden hours per response 0.5			
(Print or Type R	esponses)												
1. Name and Address of Reporting Person <u>*</u> Henriquez Manuel A			2. Issuer Name and Ticker or Trading Symbol Hercules Capital, Inc. [HTGC]						5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) C/O HERCULES CAPITAL, INC., 400 HAMILTON AVENUE SUITE 310			3. Date of Earliest Transaction (Month/Day/Year) 03/13/2017						(Check all applicable) Director 10% Owner Officer (give title Other (specify below) President & amp; CEO				
	(Street) 4. If Amen Filed(Mont					Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PALO ALTO	D, CA 94301								Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Table	e I - Non	-Der	rivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed onth/Day/Year) Execution Date, any (Month/Day/Yea		(A) or				d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Restricted Stock Units	03/13/2017			А		7,345	A	\$ 14.85	359,210 <u>(1)</u>	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 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, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	or Exercise any		Execution Date any	ecution Date, if Transac		6. Date Exercisable and Expiration Date (Month/Day/Year) e		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners									
Rep	orting Owner	g Owner Name / Address Director 10% Owne				Relationships					
C/O HER		PITAL, INC. VENUE SUITE 31	0		Preside	nt & C	EO				

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PALO ALTO, CA 94301 Signatures

/s/Melanie Grace, Attorney-in-Fact for Manuel Henriquez <u>**</u>Signature of Reporting Person

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).

Includes additional Dividend Shares relating to deemed reinvested dividend equivalent rights that accrued on Restricted Stock Units (RSUs) previously granted. Such additional Dividend Shares are in the form of additional RSUs vest and are settled at the same time as

03/14/2017

Date

(1) (RSOS) previously granted, such additional Dividend shares are in the form of additional RSOS vest and are settled at the same time to the RSUs in respect of which the dividend equivalent rights accrued. Each such additional Dividend Share RSU is the economic equivalent of one share of Hercules Capital, Inc. common stock.

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.