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 Estimated average burden hours per

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 Respons	ses)		, ,						11)							
Name and Address of Reporting Person SIMON GARY D				2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE Corp [cpst]					I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last) (First) (Middle) 21211 NORDHOFF STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2011					<u>b</u>	Officer (give title Other (specify below)							
(Street) CHATSWORTH, CA 91311				4. If Amendment, Date Original Filed(Month/Day/Year)					A	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								l					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu any	Deemed ution Date, if ath/Day/Year)	Transaction Code		4. Securities Acquired (A) of Disposed of (I (Instr. 3, 4 and		or (D) (d 5)	5. Amount of Securities Beneficially Ov Following Rep Transaction(s)		wned I	6. Owner Form: Direct or Indi	` /	irect icial rship		
					Code	V	Amount	(A) or (D)		(Instr. 3 and				Ì	.,		
Common	Stock	03/01/2011			A		1,041	A	\$ 1.44	26,1	37		D				
Reminder: directly or i		separate line for ea	ch clas	ss of securities	s benefic	Per info	rsons w ormatio quired to	n co o res	ntaine pond (d in tunles	the colle this form ss the fo rol numb	are r	ot	`	1474 9-02)		
				tive Securities ıts, calls, war	_		-				ly Owned	l					
(,		(Month/Day/Yea	Exe r) any	Deemed exution Date, if onth/Day/Year	Code	ransaction ode of nstr. 8) De Se Ac (A Di of (Ir		Number of (Mc Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		oiratio /Day/	Exercisable iration Date Day/Year)	0	nt of lying ities	8. Price of Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)
					Code	e V	(A) (Date Exercisa		Expiration Date	Title 1	Number of Shares				

Reporting Owners

Donouting Own on Name / Adduses	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SIMON GARY D 21211 NORDHOFF STREET CHATSWORTH, CA 91311	X						

Signatures

Clarice Hovsepian, Power of Attorney for Gary Simon, Reporting Person	03/03/2011	
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).

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.