FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average
burden hours per

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

| | | 3 | ection 50(n) or tr | ie mves | sume | и Соп | трап; | y Act o | 11940 | | | | | | | | |
|-----------------------------------|---|--|--|---|------------|---|--|--|---|----------------|------------------------------------|------------------|----------------------------------|---|---|--|---|
| (Print or Ty | pe Respon | ses) | | | | | | | | | | | | | - 1 | | |
| 1. Name at Reich Ed | nd Address ward I | Symbol | 2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE Corp [cpst] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | | | | |
| 21211 No | ORDHOF | (Month/Day/ | 3. Date of Earliest Transaction (Month/Day/Year) 12/10/2012 | | | | | | | | | | | | | | |
| CHATSV | WORTH, | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| (City) | (S | tate) (Zip) | Table I - I | Non-Der | ivati | ive Secu | rities | Acqui | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | ion Date, if Transaction A Code In/Day/Year) (Instr. 8) | | Acquire Dispose (Instr. 3 | 4. Securities Acquired (A) of Disposed of (I (Instr. 3, 4 and (A) or | | 5. Amount of Securities Beneficially O Following Re Transaction(s) (Instr. 3 and 4 | | wned Form: Direct (or Indir | | ship of Be (D) rect (In | neficial vnership | | | |
| Common | Stock | 12/10/2012 | | Code F | V | 446 (1 | | 9 Price \$ 0.96 | 126,420 |) | | D | 7 | | | | |
| Reminder: directly or | | a separate line for ea | ch class of securitie | s benefic | Pe info | rsons v ormatic | on co | ontaine spond | nd to the ed in this unless the | form he for | are r m dis | not | | EC 1474 (9-02) | | | |
| | | | erivative Securitie | • | - 1 | • | - 1 | | • | wned | | | | | | | |
| Security | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deemed Execution Date, i any (Month/Day/Yea | 4. Transa Code | actio | 5. n Numb of Deriva Securi (A) or Dispo of (D) (Instr. 4, and | ative ities red seed 3, 5) | 6. Date and Exp (Month | Exercisab biration Da /Day/Year | ate r) | Title I | ınt of rlying | | ive Der Sec 5) Ben Ow Foll Rep Trai | Number of rivative surities neeficially red lowing ported nsaction(s) str. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Natur of Indirec Beneficia Ownersh (Instr. 4) |
| | | | | Code | v | (A) | (D) | | | | | Shares | | | | | |

Reporting Owners

| Donouting Own on Name / Adduses | Relationships | | | | | | | |
|---------------------------------|---------------|-----------|-----------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| Reich Edward I | | | | | | | | |
| 21211 NORDHOFF STREET | | | EVP & CFO | | | | | |
| CHATSWORTH, CA 91311 | | | | | | | | |

Signatures

| Edward I. Reich, Reporting Person | 12/12/2012 |
|-----------------------------------|------------|
| 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) The shares were withheld pursuant to the prior authorization of the Reporting Person to cover the tax liability resulting from the vesting of restricted stock units.

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.