FORM 4	1
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1	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB 3235-0287 Number: Estimated average burden hours per 0.5 response...

(9-02)

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 Type Responses)															
1. Name and Address Crouse James D	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								
(Last) (F 21211 NORDHOI		3. Date of Earliest Transaction (Month/Day/Year) 06/10/2013						Officer (give title Other (specify below) below) EVP Sales & Marketing							
CHATSWORTH,		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) (S	(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)	Exec any	Deemed ution Date, if nth/Day/Year)	Code	Transaction Acquired (A) or Code Disposed of (D)		D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or Indirect	Beneficial Ownership					
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)	(I) (Instr. 4)					
Common Stock	06/10/2013			F		2,948 (<u>1)</u>	D	\$ 1.29	275,450	D					

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

Persons who respond to the collection of SEC 1474 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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	1.1	5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numł	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	•	of	(Month/Day/Year)			Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)]	Deriv	ative		Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secur		\$		(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqui	ired			4)			0	Direct (D)	
						(A) or	r						Reported	or Indirect	
						Dispo							Transaction(s)	< / </td <td></td>	
						of (D)	·					(Instr. 4)	(Instr. 4)		
						(Instr									
					4	4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								Excicisable	Date		of				
				Code V	V	(A)	(D)				Shares				

Reporting Owners

Bonouting Ouwer Nome / Adduese	Relationships								
Reporting Owner Name / Address		10% Owner	Officer	Other					
Crouse James D 21211 NORDHOFF STREET CHATSWORTH, CA 91311			EVP Sales & Marketing						

Signatures

James Crouse, Reporting Person	06/12/2013
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.