## FORM 4

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

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
ours per response								

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

·	pe Response				1														
	Name and Address of Reporting Person * rouse 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) (First) (Middle) 16640 STAGG STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/13/2019									X Officer (give title below) Other (specify below)  EVP Sales & Marketing					
VAN NI	IVS CA 01	(Street)			4. If	Amendn	nent,	Date (	Origina	al Fi	led(Mon	h/Day/Year	)	_X_ Form file	ed by One Repo		g(Check Applica	ble Line)	
	VAN NUYS, CA 91406 (City) (State) (Zip)					Table I - Non-Derivative Securities Acqu								red Disne	osed of or	Reneficially	Owned		
1.Title of Security 2. Transaction								action 4. Securities Acquired						6.	7. Nature				
(Instr. 3)		Date	n/Day/Year)	Exec any	xecution Date, if	Code (Instr. 8)			(A) or l (D)	(A) or Disposed of		Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form:	of Indirect Beneficial Ownership			
							Code V		V	Amoun	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)			
Common	Stock		02/13	/2019				F	ī		14,86	7 D	\$ 0.79	268,934			D		
Common	Stock													1,000			I	By Children	
Reminder: indirectly.	Report on a	separate line f	or each	class of secu	rities	beneficia	ally o	owned	direct	ly or									
									С	onta	ained i	n this fo	rm ar	e not req	uired to re	formation espond un ntrol numb	less	EC 1474 (9- 02)	
				Table II - D		ative Seco			•		•			lly Owned	I				
(Instr. 3) Price Deriv	Conversion	3. Transactio Date (Month/Day/	Execution		te, if	4. Transaction Code (Instr. 8)		5. Nur of	ative (ities ared as a sed a s	r 6. Date Exe and Expira (Month/Da		cisable on Date	7. T Ame Und Sect	itle and bount of lerlying urities tr. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owners Form o  y Derivat Securit Direct or India	Ownersh (Instr. 4) O)	
						Code	V	(A)		Date Exer	cisable	Expiration Date	on Title	Amount or Number of Shares					
Repor	ting O	wners																	
					R	elationsl	nips												
Reporting Owner Name / Address Director 10% Ow									Other										
	ames D CAGG STR TYS, CA 91					EVP Sa	iles	& Ma	ırketii	ng									
Signa	tures																		

## **Explanation of Responses:**

James Crouse, Reporting Person

\*\*Signature of Reporting Person

- \* 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).

02/15/2019

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.