UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB 3235-Number: 0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per response...

OMB APPROVAL

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

(Print or Ty				ı					1.							
1. 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) 12/03/2007					<u>b</u>	Officer (give title Other (specify below)				pelow)			
(Street) CHATSWORTH, CA 91311				4. If Amendment, Date Original Filed(Month/Day/Year)					Α	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)	(5	State) (Zip)		Table I - I	Non-Der	ivat	ive Secur	ities	Acquir	ed, Disposed	of, or	Benefici	ally Owned	i		
1.Title of S (Instr. 3)	nstr. 3) Date Exe (Month/Day/Year) any		Exec any	Deemed cution Date, if nth/Day/Year)	Code		4. Securities Acquired (A) o Disposed of (D (Instr. 3, 4 and or Amount (D)		or D) d 5)	5. Amount of Securities Beneficially O Following Rep Transaction(s) (Instr. 3 and 4)	orted	6. Owner Form: Direct (or India (I) (Instr. 4	rect (Instr.	irect icial rship		
Common	Stock	12/03/2007			A		987	A	\$ 1.14	4,366		D				
				ative Securities	•	red,	quired to rrently v Disposed	res valid	pond (OMB o	d in this form unless the fo control numb ficially Owned	rm di er.		`	9-02)		
1. Title of	2.	3. Transaction		. Deemed	4.	ptio	5.			Exercisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative Security (Instr. 3)	Conversion or Exercis Price of Derivative Security		r) any	ecution Date, in y Ionth/Day/Year	Code					iration Date Day/Year)	Unde Secui	unt of rlying rities . 3 and	Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A) (E	Date Exercisa	Expiration ble Date	Title	Amount or Number of Shares				
Repoi	rting (Owners														

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

Signatures

Elizabeth M. Reynolds, Power of Attorney for Gary Simon, Reporting Person	12/05/2007
**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.