FORM 4 Check this box if no

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OIVIB APP	ROVAL
OMB	3235-
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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

(Print or Type Respo	nses)											
1. Name and Addres SIMON GARY D	2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE CORP [cpst]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 21211 NORDHOFF STREET 3. Date of Earliest Tran (Month/Day/Year) 11/13/2008						ction		<u>!</u>	Officer (give titleOther (specify below)			
(Street) 4. If Amendm Filed(Month/Day					e Oı	riginal		I	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)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect	Deemed attion Date, if th/Day/Year)	Transaction Code (Instr. 8)		Acquired	Securities quired (A) or sposed of (D) str. 3, 4 and 5) (A) or nount (D) Price		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common Stock	11/13/2008			P		2,000	A	\$ 1.018	9,167	D		
Common Stock	03/01/2009			A		2,344	A	\$ 0.48	11,511	D		
Reminder: Report on directly or indirectly.	, .	ach cla	ass of securitie	es benefic	cially	y owned						
					in re	formatio	n co o res	ntaine pond	d to the collection d in this form are r unless the form dis control number.	ot	SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned $(\textit{e.g.}, \texttt{puts}, \texttt{calls}, \texttt{warrants}, \texttt{options}, \texttt{convertible} \ \texttt{securities})$

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	of	ber vative rities prosed	6. Date Exer and Expirati (Month/Day	on Date //Year)	Amo Unde Secu	unt of erlying	Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	4, an	d 5)	Excreisable	Expiration Date	Title	Amount or Number of					

Reporting Owners

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

Signatures

Clarice Hovsepian, Power of Attorney for Gary D. Simon, Reporting Person	03/04/2009
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.