FORM 4

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

OMB APPROVAL OMB 3235-Number: 0287 Estimated average

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**

burden hours per response...

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 | ype Respons | es) | | | | | | | | | | | | | | | |
|---|---|--|------------------------|---|---------------------|-------------------------|-------------------|---|-----------------------|---|---------------------|--|--|--|--|--|---|
| Name and Address of Reporting Person * Reynolds Elizabeth M | | | | 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 Officer (give title Other (specify below) | | | | | pelow) | | |
| (Last) (First) (Middle) 21211 NORDHOFF STREET | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/10/2007 | | | | | | below) Chief Accounting Officer | | | | | | | |
| CHATS | (Str | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | | | | | |
| (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | i | | | | |
| (Instr. 3) | | 2. Transaction Date Month/Day/Ye | Exec ear) any | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction A Code I | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owner Following Reporte Transaction(s) | | orted | Form: Direct | 7. Nat of Ind Benef (D) Owne (Instr. | lirect icial rship | | |
| | | | | | Code | V | Amount | or (D) | | , | nstr. 3 and 4) | | (I) (Instr | 4) | ŕ | | |
| Common | Stock | 10/10/2007 | | | A | | 12,000 | A | \$0 | 42,0 | 00 | | D | | | | |
| | | Table I | | ative Securitie | _ | red, l | - | res valid | pond OMB or Ben | unles conti eficial | s the fo ol numb | rm dis ber. | | ` | 9-02) | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversior or Exercise Price of Derivative Security | | n 3A Ex Year) an | . Deemed ecution Date, it | 4. Transaction Code | | 5. 6. Date and Ex | | | e Exercisable 7. piration Date h/Day/Year) L S | | 7. Title Amou Under Securi (Instr. 4) | unt of Erlying S | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form of Derivative Security: Direct (D) or Indirect | 11. Nature of Indirect Beneficial Ownershi (Instr. 4) |
| | | | | | Code | e V | (A) (I | I | Date Exercis | | Expiration Date | Title I | Amount or Number of Shares | | | | |
| Repo | rting (| Owners | | | | | | | | | | | | | | | |
| Reporting | Reporting Owner Name / Address | | | Relationships | | | | | | | | | | | | | |
| Reynolds Elizabeth M 21211 NORDHOFF STREET | | | Directo | r 10% Owner | Officer | | counting | . Of | | Other | | | | | | | |
| CHATSWORTH, CA 91311 | | | | Cillei | ACC | Jounning | ; OH | icer | | | | | | | | | |

Signatures

| /s/ Elizabeth M. Reynolds | 10/12/2007 |
|---------------------------------|------------|
| **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.