# FORM 4

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

OMB APPROVAL OMB 3235-Number: 0287 burden hours 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 Estimated average **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 Type R	Responses)														
Name and A     Mayo Gary	2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE CORP [cpst]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
21211 NORI	3. Date of Earliest Transaction (Month/Day/Year) 06/02/2008									elow)					
CHATSWOI	(Street) RTH, CA 91311		4. If Amendar Filed(Month/D		e Or	iginal			6. Individual or Applicable Line) _X_ Form filed by ! Form filed by !	One Repo	orting Pers	on			
(City)	(State)	(Zip)	Table I -	Non-Dei	rivat	ive Secur	ities	Acqui	ired, Disposed	of, or l	Benefici	ally Owned	ı		
1.Title of Secur (Instr. 3)	2. Transaction Date (Month/Day.	Year) Execution	Deemed cution Date, if onth/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. 7. Na Ownership of Inc Form: Bener Direct (D) or Indirect (Instr		irect icial rship		
				Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(I) (Instr. 4	ì	*)		
common stoc	06/02/2008	3		A		1,761	A	\$ 3.76	8,520		D				
Reminder: Repo	ort on a separate line rectly.	e for each c	lass of securitie	es benefic	Pe	rsons w ormatio	n co	ntaine	nd to the colle ed in this form unless the fo	n are r	not		1474 9-02)		
	Table		ative Securitie		_cu	rrently v	of, o	OMB	control numb	oer.	ургауо				
(Instr. 3) Pric	a. Transac Date Exercise ex of ivative urity	ay/Year) Ex	3A. Deemed Execution Date, any (Month/Day/Yea	Code		n Number and Ex		ınd Ex	Exercisable piration Date //Day/Year)	Amou Under Secur	nount of derlying curities str. 3 and	Derivative Security (Instr. 5)	Derivative	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	e V	(A) (	I	Date Exercis	Expiration able Date	Title	Amount or Number of Shares				
Reporti	ng Owner	S													
			Relationsl	ips											

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

## **Signatures**

Elizabeth M. Reynolds, Power of Attorney for Gary Mayo, Reporting Person	06/03/2008
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.