### FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average
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 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  | pe Respons  | ses)                                       |             |  |                                    |                          |  |  |                    |   |   |                      |  |                |                    |  |  |   |
|---|---|--|-------------|--|------------------------------------|--------------------------|--|--|--------------------|---|---|----------------------|--|----------------|--------------------|--|--|---|
| 1. Name and Address of Reporting Person * PROTSCH ELIOT G |   |  |             | 2. Issuer Name and Ticker or Trading<br>Symbol<br>CAPSTONE TURBINE CORP [cpst]   |                                    |                          |  |  | Is                 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director Officer (give title below)  Check all applicable)  Other (specify below) |   |                      |  |                |                    |  |  |   |
| (Last) (First) (Middle) 21211 NORDHOFF STREET             |   |  |             | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>03/01/2009                |                                    |                          |  |  |                    |   |   |                      |  |                | ow)                |  |  |   |
| (Street) CHATSWORTH, CA 91311                             |   |  |             | 4. If Amendment, Date Original Filed(Month/Day/Year)                             |                                    |                          |  |  | Ap                 | 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) (State) (Zip)                                      |   |  |             | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                                    |                          |  |  |                    |   |   |                      |  |                |                    |  |  |   |
| 1.Title of S (Instr. 3)                                   |   | 2. Transaction<br>Date<br>(Month/Day/Year) | Exec<br>any |  | 3.<br>Transac<br>Code<br>(Instr. 8 |                          | 4. Secu<br>Acquir<br>Dispos<br>(Instr.   | ed (A<br>ed of<br>3, 4 a<br>(A           | A) or f (D) and 5  | r S<br>) E<br>5) F  | 5. Amount of<br>Securities<br>Beneficially Or<br>Following Rep<br>Fransaction(s)<br>Instr. 3 and 4) | orted                | 6. Owner: Form: Direct (or India (I) (Instr. 4   | ship of B O (I | enefici:<br>wnersl | ect<br>al<br>hip   |  |   |
| Common  | Stock   | 03/01/2009                                 |             |  | A                                  | V                        | 6,901  | A  | \$                 | \$  | 01,371  |                      | D  |                |                    |  |  |   |
| Reminder:<br>directly or                                  |   | separate line for ea                       |             |  |                                    | Pe<br>info<br>red<br>cur | rsons<br>ormati<br>quired<br>rrently   | on c<br>to re<br>vali                    | onta<br>spo<br>d O | ained<br>ond ui<br>MB c   | to the colle<br>in this form<br>nless the fo<br>ontrol numb   | are<br>rm di<br>er.  | not  |                | SEC 14<br>(9-0     |  |  |   |
|   |   |  |             | itive Securities<br>uts, calls, war  | -                                  | - 1                      | •  |  |                    |   | •   | l                    |  |                |                    |  |  |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)       | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date                     | 3A<br>Ex    | . Deemed<br>ecution Date, if   | 4.<br>Transa<br>Code               | actio                    | 5. Numb<br>of Deriv<br>Secur<br>Acqu<br>(A) of Dispo<br>of (D)<br>(Instr<br>4, and | ative<br>ities<br>ired<br>r<br>osed<br>) | 6. I<br>and<br>(M  | Date E  | xercisable<br>ration Date<br>Day/Year)  | Amo<br>Unde<br>Secui | de and<br>unt of<br>crlying<br>rities<br>: 3 and |                | ty S B O F R       | . Number of<br>berivative<br>ecurities<br>geneficially<br>wined<br>following<br>deported<br>dransaction(s)<br>finstr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Natur<br>of Indirec<br>Beneficial<br>Ownershi<br>(Instr. 4) |
|   |   |  |             |  | Code                               | v                        | (A)  | (D)                                      | Dat<br>Exe         |   | Expiration Date   | Title                | Amount<br>or<br>Number<br>of<br>Shares           |                |                    |  |  |   |

#### **Reporting Owners**

| Donouting Oromon Nomes / Address                                 | Relationships |           |         |       |  |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address                                   | Director      | 10% Owner | Officer | Other |  |  |  |  |
| PROTSCH ELIOT G<br>21211 NORDHOFF STREET<br>CHATSWORTH, CA 91311 | X             |           |         |       |  |  |  |  |

### **Signatures**

| Clarice Hovsepian, Power of Attorney for Eliot Protsch | 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.