FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287

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

Number: 028 Estimated average burden hours per response... 0.

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 Respon							,								
Name and Address of Reporting Person – PROTSCH ELIOT G				2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE CORP [cpst]					ost] Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_Director10% Owner						
(Last) (First) (Middle) 21211 NORDHOFF STREET				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2009						Officer (give titleOther (specify below)				elow)		
(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					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Exec any	Deemed cution Date, if nth/Day/Year)			4. Securities Acquired (A Disposed of (Instr. 3, 4 a (A O Amount (I		or (D) H (d 5) H	5. Amount of Securities Beneficially O Following Rep Fransaction(s) Instr. 3 and 4	wned laborted laborted	6. Owner Form: Direct or Indi (I) (Instr.	rect (Instr.	irect cial rship		
Common	Stock	06/01/2009			A		5,790	A	\$ 0.68	107,161		D				
Reminder: directly or		a separate line for ea	ch cla	ass of securitie	s benefic	Per info	rsons w ormation	n co res	ntained spond u	I to the colle I in this form nless the fo ontrol numb	n are rm di	not		1474 9-02)		
				ative Securitie	-	ed, I	Disposed	of,	or Benef	icially Owned						
1. Title of Derivative Security (Instr. 3)		(Month/Day/Year	Exe any	Deemed ecution Date, in y lonth/Day/Year	Code	Transaction Code		Number and		Date Exercisable d Expiration Date onth/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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 Exercisab	Expiration Date		Amount or Number of Shares				
Repoi	rting (Owners					_									

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

Signatures

Clarice Hovsepian, Power of Attorney for Eliot Protsch, Reporting Person	06/03/2009
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.