FORM 4

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

OMB APF	ROVAL
OMB Number:	3235-0287
Estimated avera	ge burden
hours per respor	nse 0.5

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 Response	es)													
1. Name and Address of Reporting Person * Jamison Darren				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				
21211 NC) ORDHOFF	(First) STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/17/2016							X Officer (give title below) Other (specify below) President & CEO				pelow)
(Street) CHATSWORTH, CA 91311				4. If Amendment, Date Original Filed(Month/Day/Year)							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 o							osed of, or	d of, or Beneficially Owned			
1.Title of S (Instr. 3)	1.Title of Security 2. Transaction 2A. Deemed 3. Transaction			n 4. Secu (A) or (D)		quired of	1 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form:	Beneficial Ownership				
						Code		Amour	(A) or (D)	Price				(I) (Instr. 4)	insu: 1)
Common	Stock		11/17/2016			P		5,250	A	\$ 0.92	79,392			D	
indirectly.				Derivative Securi			the	ntained i form di	n this fo splays a of, or Ben	rm are curre	e not rec ently vali Ily Owne	uired to re d OMB co	nformation espond un ntrol numb	ess	EC 1474 (9- 02)
		1		e.g., puts, calls, v											
Derivative Security (Instr. 3) Date (Month/Day/Year) (Month/Day/Year) Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8)		n of De Se Ac (A Dis of (In	of an		6. Date Exercisable and Expiration Date (Month/Day/Year)		Ame Und Sect	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Beneficia Ownersh (Instr. 4)			
				Code V	7 (A	.) (E		ate ercisable	Expiratio Date	n Title	or Number of Shares				

Reporting Owners

Describer Occurs Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Jamison Darren 21211 NORDHOFF STREET CHATSWORTH, CA 91311	X		President & CEO			

Signatures

Darren Jamison, Reporting Person	11/17/2016
-**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.