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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden nours per response 0.5					
ours per response					

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

Name and Address of Reporting Person * Mayo Gary			2. Issuer Name <b>and</b> Ticker or Trading Symbol CAPSTONE TURBINE Corp [cpst]				5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
21211 NORDHOFF S	(First) STREET		3. Date of Earliest Transaction (Month/Day/Year) 08/31/2016					r (give title belo		other (specify belo	w)	
CHATSWORTH, CA	(Street) . 91311	4	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					Owned				
1.Title of Security (Instr. 3)			2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of [	ed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following a(s)	6. 7. Nature Ownership of Indirec Form: Beneficia Direct (D) Ownershi	
				Code	V Amo	ount (A) or (D)	Price				or Indirect (I (I) (Instr. 4)	nstr. 4)
Common Stock	08/3	1/2016		A	27,7	777 A	\$ 0	36,302		-	D	
												10
			erivative Securitic g., puts, calls, war	es Acquire	contained the form ed, Dispose	displays a o	m are currer eficiall	not req	uired to re d OMB co	nformation espond unle ntrol numbe	ess	1474 (9-02)
Derivative Conversion D	. Transaction late Month/Day/Year)	3A. Deemed Execution Date	g., puts, calls, war 4. Transaction Code (aar) (Instr. 8)	es Acquire rrants, op 5. Number	contained the form ed, Dispose tions, conv 6. Date Ed and Expire	I in this for displays a c d of, or Bend ertible secur tercisable ation Date	eficiallities) 7. Tir Amo Unde	not required by Owned the and unt of erlying	uired to red OMB con	espond unle	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indire Beneficis Ownersh (Instr. 4)

Describer Occurs Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Mayo Gary 21211 NORDHOFF STREET CHATSWORTH, CA 91311	X					

## **Signatures**

Clarice Hovsepian, Power of Attorney for Gary Mayo, Reporting Person	09/01/2016
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.