Edgar Filing: PROTSCH ELIOT G - Form 4

PROTSCH E	LIOT G											
Form 4												
June 02, 201												
FORM	$ 4 _{\text{UNITED}}$	STATES	SECUD	ITIES AT		11 A 1	NCE	OMMISSION		PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	r. 3235-0287			
Check this	s box		vv as	inington,	D.C. 20.	J - J			Expires:	January 31,		
if no long		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								2005 ed average		
subject to Section 10		SECUDITIES										
Form 4 or									burden hou response	•		
Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934.											
obligations may continue. Section 17(a) of the Public Utility Holding Company Act of 1935 or Section												
See Instru		30(h)	of the Inv	vestment (Compan	y Act	of 194	40				
1(b).												
(Print or Type R	esponses)											
× · · J1	, i i i i i i i i i i i i i i i i i i i											
1. Name and A	ddress of Reporting	Person [*]	2. Issuer	Name and	Ticker or	Tradin	g	5. Relationship of	Reporting Pers	son(s) to		
PROTSCH ELIOT G Symbol Issuer												
CAPSTONE TURBINE Corp [cpst]					cpst]	(Check all applicable)						
(Last)								k an appreable)				
(Month/Da				-				X_ Director10% Owner				
21211 NORDHOFF STREET 06/01/2011Officer (give titleOther (specify below)							er (specify					
(Street) 4. If Amer			endment, Date Original				6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Ye					-			Applicable Line)				
Form filed by M							One Reporting Person Iore than One Reporting					
CHATSWO	RTH, CA 91311	l						Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat	te 2A. Deen	ned	3.	4. Securi	ties Ac	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	n Date, if	Transactio		isposed	l of		Form: Direct					
(Instr. 3)		any (Month/I	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5					Beneficially Owned	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
(Month/Day/Year) (Instr. 8					(1130. 5,	+ and	5)					
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(instround 1)				
Common Stock	06/01/2011			А	2,357	А	\$ 1.67	147,120	D			
STOCK							1.07					

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	of Deriv Secur Acqu (A) o Dispo of (D	orNumber Expir of (Mon Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		6. Date Exercisable and Expiration Date (Month/Day/Year)		tle and unt of vrlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Dama	utin a O		Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh	nps		
	Director	10% Owner	Officer	Other	
PROTSCH ELIOT G 21211 NORDHOFF STREET CHATSWORTH, CA 91311	Х				
Signatures					
Clarice Hovsepian, Power of A Person	orting	06/02/2011			
<u>**</u> Signature		Date			

Relationships

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.