Edgar Filing: CAPSTONE TURBINE Corp - Form 4

| CAPSTONE Form 4 August 09, 2 | TURBINE Corj | 2 | | | | | | | | | |
|---|--------------------------------------|-----------------|---|---|-------------------|--------|---|--|--|---------------------|--|
| | | | | | | | | | OMB A | PROVAL | |
| FORM | UNITED | STATES | | ITIES A hington, | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Section 16. | | | | HANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: | January 31, 2005 | |
| | | | | | | | | | Estimated average burden hours per | | |
| Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b). | Filed put ns Section 170 | (a) of the | | ility Hold | ling Con | npany | Acto | e Act of 1934, f 1935 or Sectio 40 | response n | 0.5 | |
| (Print or Type F | Responses) | | | | | | | | | | |
| Jamison Darren Symbol CAPSTO (Last) (First) (Middle) 3. Date of (Month/Da 21211 NORDHOFF STREET 08/09/20 (Street) 4. If Amer | | | Symbol | - | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <u>X</u> Director X Officer (give title 10% Owner (specify below) President & CEO | | | |
| | | | CAPSTONE TURBINE Corp [cpst] | | | | cpst] | | | | |
| | | | (Month/D | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2016 | | | | | | | |
| | | | Amendment, Date Original l(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| CHATSWO | ORTH, CA 91311 | | | | | | | Form filed by N Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Securi | ties Acc | quired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year |) Execution any | emed on Date, if 'Day/Year) | 3. Transactio Code (Instr. 8) | on(A) or D (D) | ispose | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common | 08/09/2016 | | | Code V P | Amount 1,750 | | Price \$ | (Instr. 3 and 4) 74,142 | D | | |
| Stock | | | | | | | 1.47 | | | | |

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)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Code | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Securi (Instr. | int of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|---|---|---|--------|---|---------------------|--------------------|---|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|------------|-----------------|-------|--|--|--|
| http://mg officer.round/induces | Director | 10% Owner | Officer | Other | | | |
| Jamison Darren 21211 NORDHOFF STREET CHATSWORTH, CA 91311 | Х | | President & CEO | | | | |
| Signatures | | | | | | | |
| Darren Jamison, Reporting Person | (|)8/09/2016 | | | | | |
| **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.