FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL									
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Kelly Patrick T 2. Date of Even Requiring State (Month/Day/Yea				nent	3. Issuer Name and Ticker or Trading Symbol ACTIVE POWER INC [ACPW]								
(Last) C/O 2128 W	(Last) (First) (Middle) C/O 2128 W BRAKER LANE					tionship of Reporting Person all applicable) Director Officer (give title	on(s) to Issuer 10% Owner Other (specify		If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check				
(Street) AUSTIN (City)	TX (State)	78758 (Zip)				below)	below)	City	Applio X		y One Reporting Person y More than One erson		
	Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						int of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
No securities are beneficially owned						0	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Secur		ity (Instr. 4) Conv		cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title	3	Amount or Number of Shares	Price of Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)			

Explanation of Responses:

Remarks:

<u>T. PATRICK KELLY</u> <u>01/28/2013</u>

** Signature of Reporting Person Dat

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).