FORM 4

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

OMB APPROVAL
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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

					Relations	hins								
Repor	ting O	wners												
				Code V	(A) (D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares				
Security		3. Transaction Date (Month/Day/Y	Execution Da any	te, if Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and I (Mor	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)
			(Derivative Securiti e.g., puts, calls, wa	rrants, op	the fo	nined in orm dis sposed of conver	n this form splays a coof, or Bene tible secur	m are curre	e not requ ntly valid lly Owned	ired to res	spond unles trol number	s	
Reminder: 1	Report on a s	eparate line fo	r each class of secur	ities beneficially ov	vned direct	•			d to	the collec	ction of inf	ormation	SEC	1474 (9-02)
Class A (Common S	tock	10/26/2015		P		8,076	A \$ 2	§ 21.5	34,720]	D	
				(Month/Day/Tear)	Code	V	Amoun	(A) or (D)	Price	(msu. 3 a	nu 4)			(Instr. 4)
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securities Acquires (A) or Disposed of (Γ (Instr. 3, 4 and 5)					ollowing O Fo	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
(City)		(State)	(Zip)	Та	ble I - No	n-Deri	vative S	Securities .	Acqui	ired, Dispo	osed of, or I	Beneficially C	wned	
(Street) MENOMONEE FALLS, WI 53051			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							
(Last) (First) (Middle) C/O ACTUANT CORPORATION, N86 W12500 WESTBROOK CROSSING			3. Date of Earliest Transaction (Month/Day/Year) 10/26/2015					X_Officer (give title below) Other (specify below) EVP-Human Resources						
(Print or Type Responses) 1. Name and Address of Reporting Person* Skogg Eugene Edward				2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Skogg Eugene Edward C/O ACTUANT CORPORATION N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051			EVP-Human Resources			

Signatures

/s/ Eric Orsic, as Attorney-in-Fact	10/28/2015
**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.