

(Print or Type Responses)

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

| OMB APPROVAL | | | | |
|--------------------------|-----------|--|--|--|
| OMB Number: | 3235-0104 | | | |
| Estimated average burden | | | | |
| nours per respons | se 0.5 | | | |

INITIAL STATEMENT OF 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

| (Common of Type Company) | | | | | | | | | | | |
|---|------------------------------|---|----------------------------|---|-----------------|---|---|--|--|--|--|
| 1. Name and Address of Reporting Person * Axline William | | 2. Date of Event Requiring Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU] | | | | | | | |
| (Last) (First) (Middle) 13000 WEST SILVER SPRING DRIV | | | | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | | |
| BUTLER, WI 53201 | | | | Check all applicable) Director 10% Owner X Officer (give title below) Executive VP, Electrical | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) (State) (Zip) | | | Table I - I | Non-Derivat | tive Securities | Beneficia | eneficially Owned | | | | |
| 1.Title of Security (Instr. 4) | | | | | | 4. Nature of (Instr. 5) | Nature of Indirect Beneficial Ownership str. 5) | | | | |
| Reminder: Report on a separate line for each classification and the | oond to the lisplays a c | collection of urrently valid | information of OMB control | contained in a | | · | · | | | | |
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exer Expiration I | Date Exercisable and spiration Date Se (onth/Day/Year) 3. | | Owned (e.g., puts, calls, warra 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 5. Owners Form of Derivative Security: | rship ve : | 6. Nature of Indirect Beneficia Ownership (Instr. 5) | | | |
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Security | | Direct (D) or indirect (I) Instr. 5) | | | | |
| Employee Stock Option (right to buy) | (2) | 01/14/2018 | Class A Common Stock | 30,000 | \$ 28.36 | D | | | | | |

Reporting Owners

| 1 | | Relationships | | | | |
|--------------------------------|--|---------------|---------|--------------------------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| | Axline William 13000 WEST SILVER SPRING DRIVE BUTLER, WI 53201 | | | Executive VP, Electrical | | |

Signatures

| /s/ Eric Orsic, Attorney-in-Fact | 01/24/2008 |
|----------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * 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).
- (1) Options granted under the Actuant Corporation 2002 Stock Plan.
- (2) Fifty percent of the options become exercisable on 01/14/2011, and the balance becomes exercisable on 01/14/2013.

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.