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

| (Print or Type | e Responses) | | | 1 | | | | | | | | | | | | | |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------|------------|-------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------|-------------------------------|-----------|
| 1. Name and Address of Reporting Person *- ARZBAECHER ROBERT C | | | | 2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU] | | | | | | | | _x_ | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner | | | | |
| 13000 WEST SILVER SPRING DRIVE | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/12/2010 | | | | | | | | X | X_ Officer (give title below) Other (specify below) President and CEO | | | | | |
| (Street) BUTLER, WI 53007 | | | | 4. If Amo | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | _X_ F | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | | (State) | (Zip) | | | Tal | ble I | - Noi | ı-Derivat | ive Secu | rities 2 | Acquired, | Disposed o | f, or Benefi | cially Owned | | |
| (Instr. 3) Date (Month/Day/Year) | | Execution Date, if | | 3. Trai Code (Instr. | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securi Owned Following R Transaction(s) (Instr. 3 and 4) | | ties Benefici | ally 6. | | ıl | | | |
| | | | | | | Cod | de | V | Amount | (A) or (D) | Price | , | | | (I) (Instr. 4) | | |
| Class A Co | ommon Sto | ock | 01/12/2010 | | | A | | | 38,900 (1) | A | <u>(2)</u> | 653,664 | 4 | | D | | |
| Class A Co | ommon Sto | ock | | | | | | | | | | 35,792 | <u>(3)</u> | | I | Byy 40 | 1(k) |
| Class A Co | ommon Sto | ock | | | | | | | | | | 11,900 | | | I | By IRA | |
| Class A Co | ommon Sto | ock | | | | | | | | | | 60,000 | | | I | By Fam Limited Partners | l |
| Class A Common Stock | | | | | | | | | | | 2,200 | | | I | By Fan | nily (4) | |
| Class A Common Stock | | | | | | | | | | | 2,400 | | | I | By Spo | use | |
| Class A Co | ommon Sto | ock | | | | | | | | | | 7,860 | 5) | | I | By Def | |
| Reminder: Re | eport on a sep | parate line for each | h class of securities b | eneficiall <u>y</u> | y owne | d directly | or ii | Pe in | rsons w this forn | n are no | t requ | | espond ur | | n contained orm displays | SEC 14' | 74 (9-02) |
| | | | Table I | | | | | | | | | ially Own | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | errivative courity Conversion Date or Exercise (Month/Day/Year) Execution Date, if Code Code Securities (Month/Day/Year) Execution Date, if Code Securities (Month/Day/Year) E | | 6. Da Expi | Date Exercisable and piration Date of Ur (onth/Day/Year) 7. Tit of Ur (onth/Day/Year) | | | Title and Amount 8. Price of Derivative ecurities Security | | Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form of Derivative Security: Direct (D) or Indirect (I) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | | |
| | | | | Code | v | (A) | (D) | Date Exer | cisable E | xpiratior Oate | Т | îtle . | Amount or Number of Shares | | (Instr. 4) | (Instr. 4) | |
| Employee Stock Option (right to buy) (6) | \$ 19.2 | 01/12/2010 | | A | 1: | 33,300 | | | (7) 0 | 1/12/20 | | Class A Common Stock | 133,300 | \$ 0 | 133,300 | D | |

Reporting Owners

| | Relationships | | | | | | |
|---------------------------------------------------------------------------|---------------|--------------|-------------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| ARZBAECHER ROBERT C 13000 WEST SILVER SPRING DRIVE BUTLER, WI 53007 | X | | President and CEO | | | | |

Signatures

| /s/ Eric Orsic, as Attorney-in-Fact | 01/14/2010 |
|-------------------------------------|------------|
| 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).
- (1) Restricted stock granted under the Actuant Corporation 2009 Omnibus Incentive Plan.
- (2) Not applicable.
- Represents the best estimate of the number of share equivalents held by the reporting person in the unitized stock fund of the Actuant 401(k) Plan. The unitized stock fund consists of stock of (3) Actuant and cash and other short term investments. The number of Actuant share equivalents fluctuates depending on the ratio of the number of shares of stock of Actuant in the fund to other
- (4) Owned by daughters.
- (5) Best estimate of shares held pursuant to Actuant Corporation Deferred Compensation Plan.
- (6) Options granted under the Actuant Corporation 2009 Omnibus Incentive Plan.
- (7) Fifty percent of the option becomes exercisable on 01/12/2013, and the balance becomes exercisable on 01/12/2015.

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.