FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

1. Name and Address of Reporting Person – Goldstein Mark					2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]								5. Relationship of Reporting Person(s) to Issuer				
13000 WEST SILVER SPRING DRIVE				Date of Earliest Transaction (Month/Day/Year) 01/12/2010 If Amendment, Date Original Filed(Month/Day/Year)													
												X Fo					
BUTLER,		(State)	(Zip)					***	.		••			6 D	m . 11 . 0 . 1		
			Т	24 5								1			ficially Owned	7.37.	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		Beneficia Reported (Instr. 3 a			Beneficia Ownersh			
Class A Co	ommon Ste	ock	01/12/2010			Α	١		13,000) A	<u>(2)</u>	80,000		D			
Class A Co	ommon Ste	ock										5,500	5,500		I	By IRA	1
Class A Co	ommon St	ock										5,009 (3)	I By 4 Plan		By 401 Plan	(k)
Class A Co	ommon St	ock										1,176			I	By ESF	PP
Class A Co	Class A Common Stock										11,136 (4)			I	By Def Compe Plan		
Reminder: Re	eport on a se	parate line for ea	ch class of securitie					Pe in a o	ersons v this for currentl	m are n y valid (ot red OMB		espond (mber.		ion contained form displays		74 (9-02)
1 75'41 . 6	l _a	2 T		(e.g., p	ıts, cal	ls, warr	ants,	optio	ns, conv	ertible se	curiti	ies)		0 D : C	0.31 1 6	10	11.37.
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yo		c, if Transaction Code (Instr. 8)		of Deriv Securitie Acquired or Dispo of (D)	of Derivative Securities Acquired (A) or Disposed of (D) Instr. 3, 4,		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Natur of Indirect Beneficia Ownersh (Instr. 4)
				Code	· V	(A)	(D)		cisable	Expiratio Date	n	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Employee Stock Option	\$ 19.2	01/12/2010	0	A		44,400			<u>(6)</u>	01/12/2	020	Class A Common Stock	44,400	\$ 0	44,400	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Goldstein Mark 13000 WEST SILVER SPRING DRIVE BUTLER, WI 53007			Chief Operating Officer				

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 (3) of 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
- (4) Best estimate of shares held pursuant to Actuant Corporation Deferred Compensation Plan.
- (5) Options granted under the Actuant Corporation 2009 Omnibus Incentive Plan.
- (6) 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.