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

(Print or Ty	pe Response	s)																
Name and Address of Reporting Person * Pauli Matthew					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						
N86 W12500 WESTBROOK CROSSING					3. Date of Earliest Transaction (Month/Day/Year) 08/22/2013						X Officer (give title below) Other (specify below) Corporate Controller							
(Street) MENOMONEE FALLS, WI 53201				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3) 2. Transactic Date (Month/Day)			any	emed on Date, if /Day/Year)	Code					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ving	6. Ownershi Form: Direct (D)	7. Nature p Indirect Beneficia) Ownersh	Beneficial Ownership			
							ode	V	Amount	(A) or (D)	Price				or Indirect (Instr. (I) (Instr. 4)			
Class A (Common S	Stock	08/22/	2013			A	4		1,000 (1)	A	<u>(2)</u>	13,084			D		
Class A Common Stock										1,061 (3)			I	By 401	(k)			
Class A Common Stock										216	I		By ESP	PP				
Class A Common Stock										61 (4)			I	By Def Compe				
Reminder:	Report on a s	separate line	e for each			•			Pctl	ersons v ontained ne form o	vho re in thi	s form	d to the colle n are not requ urrently valid	uired to res OMB cont	pond	d unless	SEC 147	74 (9-02)
		1			(e.g.,	puts, calls,	warr		opti	ons, conv	ertible	securi	ties)					
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day On Exercise Conversion Date (Month/Day On Exercise Conversion Derivative Security		ay/Year) 3A. Deemed Execution Da any (Month/Day/		Date, if	Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ive es ed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	(Instr. 5) Ben Ow Foll Rep Trai		ivative urities eficially ned owing orted nsaction(s)	Ownership Form of E Derivative C	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V	V (A	(I]	Date Exercisable		ration	Title Amount or Number of Shares					

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Pauli Matthew N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53201			Corporate Controller				

Signatures

/s/ Eric Orsic, as Attorney-in-Fact	08/26/2013	
**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 units 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
- (3) consists of stock 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 other investments.
- (4) Best estimate of shares held pursuant to Actuant Corporation Deferred Compensation Plan.

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.