FORM	4
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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).

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

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#### 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 Responses)								·			
1. Name and Address of Reporting Person <sup>*</sup> Ferland E James Jr	1	2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) C/O ACTUANT CORPORATION, N WESTBROOK CROSSING	TO C TITLE COO	3. Date of Earliest Transaction (Month/Day/Year) 01/20/2015						Officer (give title below) Other (specify below)			
(Street) MENOMONEE FALLS, WI 53051	4	4. If Amendment, Da	te Original	Filed(	Month/Day/Y	ear)	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							ed		
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transact Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Reported Transaction(s)Ownership Form: Direct (D) or Indirect		Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)		
Class A Common Stock	01/20/2015		А		2,829 (1)	А	<u>(2)</u>	5,829	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4. 5. Number		6. Date Exercisable and		7. Title and Amount		8. Price of	9. Number of	10.	11. Nature		
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Dat	e	of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivat	ive	(Month/Day/Y	ear)	Securities Security		Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	)	Securiti	es	( ) (		(Instr. 3 and 4) (Instr.		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquire	ed							2	(Instr. 4)
	Security					(A) or					0	Direct (D)			
						Dispose	ed				1	or Indirect			
						of (D)	4				Transaction(s)	· · /			
						(Instr. 3 and 5)	, 4,						(Instr. 4)	(Instr. 4)	
						and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable	Date	Title	Number of				
				Code	v	(A)	(D)				Shares				
				Coue	v	(A)	(D)				Shares				
Employee															
Stock										Class A					
Option	\$ 22.98	01/20/2015		А		3,875		12/20/2015	01/20/2025		3 875	\$ 0	3,875	D	
(Right to	\$ 22.90	01/20/2015		11		5,075		12/20/2013	01/20/2023	Stock	5,075	ΨΟ	5,075	D	
										SIDCK					
Buy) (3)															

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ferland E James Jr C/O ACTUANT CORPORATION N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051	Х						

### Signatures

/s/ Eric Orsic, as Attorney-in-Fact	01/22/2015
**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).
- (1) Restricted Stock granted under the Actuant Corporation 2009 Omnibus Incentive Plan.
- (2) Not applicable.
- (3) Option granted under the Actuant Corporation 2009 Omnibus Incentive 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.