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 Typ	e Response	s)															
1. Name and Address of Reporting Person * LAMPEREUR ANDREW					2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]							Direct	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) N86 W12500 WESTBROOK CROSSING					3. Date of Earliest Transaction (Month/Day/Year) 10/19/2015							X Officer (give title below) Other (specify below) Executive Vice President - CFO					
(Street)				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				
MENOMONEE FALLS, WI 53051													To fill filed by Wiole than One Reporting Ferson				
(City)		(State)		(Zip)			Table I	- No	1-Deri	ivative	Secu	rities A	acquired, Disp	osed of, or I	Beneficially O	wned	
(Instr. 3) Da		Date (Month/Day/Year) a		Execution any	xecution Date, if		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (hip Indirect Benefic	Beneficial Ownership	
						Code	· V	Am		(A) or (D)	Price	(mour o una	,		(I) (Instr. 4)		
Class A C	Common S	Stock	10/19/2	2015			A		3,8	319	A	\$ 0	272,522		D		
Class A C	Class A Common Stock 10/19/2015				F		1,8	314	D	\$ 21.11	270,708		D				
Class A Common Stock											12,641 (1)		I	By 40	1(k)		
Class A Common Stock											737		I	By ES	PP		
Class A Common Stock										4,675 ⁽²⁾		I	By De Comp	ferred ensation			
Class A Common Stock											2,250		I	By Fa	mily (3)		
Reminder: R	Report on a s	separate lin	e for each						Perso conta the fo	ons w ained orm d	ho re in thi	is form ys a c	d to the collect are not requ	uired to res OMB cont	spond unles	s	474 (9-02)
				Table I		ative Secu puts, calls,							ficially Owned ties)				
Derivative Conversion Date Security or Exercise (Month/Day/Year) and			ed Date, if	4. Transaction Code	5. Num of Deriv Secu Acqu (A) c Disp of (E) (Insti	5. Number		and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect			
						Code	V (A)	(D)	Date Exerc	cisable		iration e	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
LAMPEREUR ANDREW N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051			Executive Vice President - CFO					

Signatures

/s/ Eric Orsic, as Attorney-in-Fact	10/21/2015
**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).
- Represents the best estimate of the number of share equivalents held by the person in the unitized stock fund of the Actuant 401(k) Plan. The unitized stock fund consists of (1) 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.
- (2) Best estimate of shares held pursuant to the Actuant Corporation Deferred Compensation Plan.
- (3) Shares held by the reporting person's children through custodians.

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.