FORM 4

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

	OMB APP	ROVAL
OMB I	Number:	3235-0287
Estima	ated average	e burden
hours	per respons	e 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 NI 1																	
1. Name and Address of Reporting Person * Hunter R Alan Jr				2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner					
(Last) (First) (Middle) N86 W12500 WESTBROOK CROSSING				3. Date of Earliest Transaction (Month/Day/Year) 01/19/2016								0	officer (give	title below)	Oth	er (specify belo	ow)
(Street) MENOMONEE FALLS, WI 53051				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu							lired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any	emed on Date, if (Day/Year)	(Instr. 8)		(A)	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Own Tran		5. Amount of Securities Beneficially Dwned Following Reported Fransaction(s)			7. Nature of Indirect Beneficial Ownership		
				(WOIIII/	Day/Tear)	Coo	de V	V An	nount ((A) or (D)	Price	(Instr. 3 and 4)			Direct (D) Ownersh (Instr. 4)		
Class A Co	ommon Sto	ock	01/19/2016			A		3,0)36 A	4	<u>(2)</u>	12,13	66			D	
								ทเร ชก	rm are :	not re	allirea	I TO PA	snond i	iniess the	torm disni	IVS	
					ve Securiti		a c	urrent Disposo	ly valid	OMB Benefi	contro	ol nun	nber.	iniess the	form displa	ıys	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. Number of Derivation	mber ative ities red sed 3, 4,	a co juired, I s, option	Dispose s, conv Exerci	ly valid ed of, or vertible s sable and	Benefi securit	icially (ies) 7. Titl of Und	Owned	Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	of 10. Owners Form o Derivat Security Direct (or Indir	Ownersh (Instr. 4) D) ect
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	s, calls, wa 5. Nun tion of Derive Securion Acquion (A) or Dispoon of (D) (Instr.	mber ative ities red seed 3, 4,	a continuity and a cont	Dispose s, conv Exerci ion Dar //Day/Y	ly valid ed of, or vertible s sable and	Benefi securit	icially (ies) 7. Titl of Und	Owned le and Aderlyin ities . 3 and	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form o Derivat Security Direct (or Indir (s) (I)	hip of Indire Benefici Ownersh (Instr. 4) D)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Hunter R Alan Jr N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051	X					

Signatures

Eric Orsic, as Attorney-in-Fact	01/21/2016
**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.
- ($\bf 3$) 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.