FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

| | pe Response | | | | | | | | | | | | - | | | | | | | | | | | | |
|--|---|--------------------------------|--|---------------------------------------|--------------|----------------------------------|-------------------|---------------------------------------|---|---|------------------------------------|--------------------|--|---|---|--|--|---|-----------|--|--|--|--|--|--|
| 1. Name an Bockhors | | Issuer Nar TUANT | | | | _ | Symbo | 1 | 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | | | | | | | | | | |
| (Last) (First) (Middle) C/O ACTUANT CORPORATION, N86 W12500 WESTBROOK CROSSING | | | | | | ate of Ear 09/2017 | liest ' | Transa | ection | (Month/D | ay/Ye | ar) | X Officer (give title below) Other (specify below) Exec. VP, Energy Segment | | | | | | | | | | | | |
| MENON | 4. If | Amendm | ent, I | Date C | rigin | al Filed(Mo | nth/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 | | | | | | | | | | | | | | | | |
| MENON (City | | | Tal | ble I - | Non- | Derivativ | e Secu | rities A | Acquir | ed, Dispo | osed of, or B | Benefi | cially Ow | ned | | | | | | | | | | | |
| (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | | emed on Date, if /Day/Year | 3. Tra | ansacti | | 4. Securi (A) or Di (Instr. 3, | ies Ac | quired l of (D) | 5. An Bene Repo | nount of | Securities Owned Follow saction(s) | wing | 6. Ownershi Form: Direct (D) | 7. Nature Indirect Beneficia Ownersh | ıl ip | | | | | | |
| | | | | | | | (| Code | V | Amount | (A) or (D) | Price | | | | | (I) (Instr. 4) | t (Instr. 4) | | | | | | | |
| Class A Common Stock | | | 01/09/2 | 709/2017 F 504 D \$ 26.1 | | | | | | | 31,1 | 68 | | | D | | | | | | | | | | |
| Class A Common Stock | | | | | | | | | | | | | 3,37 | 8 (1) | | I | By 401 Plan | (k) | | | | | | | |
| Class A Common Stock | | | | | | | | | | | | | 193 | (2) | | | I | By Def Compe Plan | | | | | | | |
| Reminder: | Report on a s | separate lin | e for each | ı class of se | ecurities l | beneficiall | y ow | vned di | F | ersons v | vho re | is forn | n are ı | not requ | ction of infe ired to res OMB cont | pond | d unless | SEC 147 | 74 (9-02) | | | | | | |
| | | | | Table I | | ative Secu | | | | | | | | Owned | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transac Date (Month/D | ed Date, if | 4. Transacti Code (Instr. 8) | 5 on N o I S | 5. | tive ies ed ed 3, | 6. Date Ex and Expira (Month/Da | ercisab tion D | ole ate | 7. Titl Amou Under Securi | nt of lying | Derivative Security (Instr. 5) | Deriv Secur Bene Owne Follo Repo | rities ficially ed owing orted saction(s) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirec Beneficial Ownershi (Instr. 4) | | | | | | | | |
| | | | | | | Code | V | (A) | | Date Exercisabl | | iration | Title | Amount or Number of Shares | | | | | | | | | | | |

Reporting Owners

| | Relationships | | | | | | | | | | | | |
|--|---------------|--------------|--------------------------|-------|--|--|--|--|--|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | | | | | | |
| Bockhorst Kenneth C/O ACTUANT CORPORATION N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051 | | | Exec. VP, Energy Segment | | | | | | | | | | |

Signatures

| /s/ Barrett Lopez, as Attorney-in-Fact | | 01/11/2017 | 7 | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| *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.

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.