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 * Wrocklage Robert				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							
(Last) (First) (Middle) C/O ACTUANT CORPORATION, N86 W12500 WESTBROOK CROSSING			3. Date of Earliest Transaction (Month/Day/Year) 01/20/2018						X Officer (give title below) Other (specify below) Corporate Controller								
(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 Person Form filed by More than One Reporting Person							
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if any (Month/Day/Year		(Instr. 8)		4. Securities Acqui (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 6. Ownersh Form: Direct (I		rship of Bo (D) O	eneficial wnership					
					Co	ode	V	Amour	(A) or (D)	Price				(I) (Instr.	· ·		
Class A (Common S	Stock	01/20/2018]	F		439	D	\$ 26	11,937			D		
Class A Common Stock		01/22/2018			1	A		2,868 (1)	A	<u>(2)</u>	14,805	4,805		D			
Class A Common Stock											225			I	4(<u>(3</u>	01(k)	
Reminder:	Report on a s	separate line for	r each class of securi	ities bene	ficially o	wned o	Į.	- Perse conta	ons wh ained ii	o respo	rm are	not requ	ction of inf uired to res	spond unle	ss	SEC 14	74 (9-02)
			Table II - I							of, or Ben tible secu		lly Owned					
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Data	te, if Transaction Code (Instr. 8) Tear) (Instr. 8) Secur Acqu (A) or Disport of (D) (Instr. 4, and		ative ities ired rosed) . 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		Ame Und Seco	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ow For Der Sec Dir or I	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co	ode V	(A)		Date Exer	cisable	Expiratio Date	n Title	Amount or Number of Shares					

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Wrocklage Robert C/O ACTUANT CORPORATION N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051			Corporate Controller				

Signatures

/s/Barrett Lopez, Attorney-in-Fact	01/23/2018			
**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 2017 Omnibus Incentive Plan.
- (2) Not Applicable
- 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
- (3) 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.

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.