### 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 Ty	pe Response	s)																		
1. Name and Address of Reporting Person* Dillon Ricky T						2. Issuer Name and Ticker or Trading Symbol ACTUANT CORP [ATU]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) C/O ACTUANT CORPORATION, N86 W12500 WESTBROOK CROSSING						3. Date of Earliest Transaction (Month/Day/Year) 01/22/2018								X Officer (give title below) Other (specify below)  Executive Vice President - CFO						
(Street) MENOMONEE FALLS, WI 53051					4. If	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							Acquir	uired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		Date (Month/Day/Year) Ex		Executi any	A. Deemed xecution Date, if by Month/Day/Year)		Code		(A) or Disposed of (D) (Instr. 3, 4 and 5)			Bene Repo	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Form: Direct (D)	Beneficia	ıl		
							Code	V	Amount	(A) or (D)	Price	:				(I) (Instr. 4)				
Class A Common Stock 0		01/22/2	2018				A		10,516 (1)	A	<u>(2)</u>	35,065			D	D				
Class A Common Stock												703			I	401(k)	(3)			
Class A Common Stock													397			I			Deferred Compensation	
Reminder:	Report on a s	separate lin	e for each						i c	Persons wontained he form d	ho res in this isplay	form s a c	n are urren	not requ tly valid	ction of inf uired to res OMB cont	spone	d unless	SEC 14	74 (9-02)	
				Table II						d, Disposed ions, conve				y Owned						
Security	2. Conversion or Exercise Price of Derivative Security	onversion Date r Exercise (Month/Date) rice of erivative		Day/Year) Execution Day		4. Transaction Code Year) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		te )	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Deriv Secu Bene Own Follo Repo	rities eficially ed owing orted saction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect I) Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	V	(A)		Date Exercisable		ration	Title	Amount or Number of Shares						

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Dillon Ricky T C/O ACTUANT CORPORATION N86 W12500 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051			Executive Vice President - CFO				

#### **Signatures**

/s/Barrett Lopez, Attorney-in-Fact	01/24/2018	
**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.
- (4) Best estimate of shares held pursuant to 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.