Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
---------------	------	-------

Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
to Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response: 0.8									

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Happe Michael J				2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO]								(Chec	ationship of Reportir k all applicable) Director Officer (give title		10% O		wner		
(Last) WINNEI	(Fir BAGO IND	est) (N	3. Date of Earliest Transaction (Month/Day/Year) 10/13/2023								X	below			Other (specify below)				
13200 PIONEER TRAIL				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) EDEN PRAIRIE MN 55347													X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Ľip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ided to					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date		Date,			es Acquired (A) Of (D) (Instr. 3, 4		4 and Se Be Ov		5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect I	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)		e	Transaction(s) (Instr. 3 and 4)				(111501. 4)
Common	Stock, \$.50) par value		10/13/2	2023		F		3,567(1)	D \$5		6.79	79 251,221		D				
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year)				nsaction de (Instr. Servivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities ired r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O F6 D 01 (1)	0. Dwnership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares						

Explanation of Responses:

1. Upon the annual incremental vesting of a restricted stock unit award granted 10/13/2022 under the Winnebago Industries, Inc. 2019 Omnibus Equity, Performance Awards, and Incentive Compensation Plan, which is a Section I 6(b) plan, the reporting person exercised their option to have a portion of such vested shares, equal in value to the tax amount calculated based upon the value of such shares on the vesting date, to be withheld by the Company in order to meet the reporting person's tax obligation incurred upon the vesting of such restricted stock unit award.

/s/ Stacy L. Bogart, SVP,

General Counsel and

10/16/2023

Secretary, Attorney-in-Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.