FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
| raog.o., | ٥.٠. | _00.0 | |

| 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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* Woodson Bret A | | | | | 2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC WGO | | | | | | | | (Ched | ck all app Direc | licable) | Ü | erson(s) to Is 10% Ov Other (s | wner | |
|--|---|--|--------|---|--|--|---|---------------------------|------------------------------|-----------------------------|---|--|--|---|--|----|--------------------------------------|--|--|
| (Last) (First) (Middle) 13200 PIONEER TRAIL | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/17/2021 | | | | | | | | Λ | X Officer (give title Other (specify below) below) SVP-Human Resources | | | | | | |
| (Street) EDEN PRAIRII | E MI | N 5 | 5347 | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | on | | |
| (City) | (St | ate) (ž | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | ative S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Benef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5) | | | | Securit Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | Code | v | Amount | (A) (D) | or Pri | ce | Transa | action(s) . 3 and 4) | | | (1130.4) | |
| Common Stock, \$.50 par value 12/17/2 | | | .021 | | | F | | 369(1) | Г | \$(| 68.41 | 17 | 7,051 | | D | | | | |
| Common Stock, \$.50 par value 12/17/2 | | | 2021 | | | F | | 106(1) | D \$68.41 | | 68.41 | 16,945 | | | D | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, /Day/Year) | 4. Transactior Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | 6. Date Expirat (Month | ion Da | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | Price of erivative ecurity nstr. 5) | | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

1. Upon the annual incremental vesting of a restricted stock unit award granted 12/17/2019 under the Winnebago Industries, Inc. 2019 Omnibus Incentive Plan, which is a Section 16(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 of the Company in order to meet the reporting person's tax obligation incurred upon the vesting of such restricted stock award.

/s/ Stacy Bogart, Senior Vice President, General Counsel, Secretary and Corporate Responsibility

** Signature of Reporting Person

12/21/2021

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.