FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL OMB Number: 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*					2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Potts Randy J					"	WINNEDAGO INDOSTRIES INC [WGO]								1	X Dire		ctor		10% Owner		
(Last)	ast) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								-	X	X Officer (give title below)			Other below)	(specify	
WINNEBAGO INDUSTRIES, INC.				10/	10/10/2013								Chrmn, CEO & President								
P.O. BOX 152																					
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) FOREST	'CITV I	Δ	50436											٦	X Form filed by One Reporting Person					on	
- TOKEST	CITT		J04J0												Form filed by More than One Reporting						
(City)	(:	State) (Zip)			Person															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date		Date,	3. Transaction Code (Instr. 8)		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			l and Secu Bene Own		icially d Following	Form: D (D) or In	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount		(A) or (D)	Price	:	Transa	Reported Transaction(s) Instr. 3 and 4)			(Instr. 4)	
Common Stock, \$.50 par value 10/10/)/2013 ⁽¹⁾				F		4,756	4,756 ⁽¹⁾ D \$		\$26	5.66	66 51,133		Е)		
	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)	vative Conversion Date Execution Date, if any					Fransaction of Code (Instr. B) Se Ac (A' Di: of		ative rities ired osed	6. Date Expirati (Month/	on Da		Am Sec Un Dec	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	,,	(A)		Date Evercis		Expiration	Titl	or Nui of	mber							

Explanation of Responses:

1. Upon the annual incremental vesting of a restricted stock award granted 10/10/2012 under the Winnebago Industries, Inc. 2004 Incentive Compensation 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, to be withheld by the Company in order to meet reporting person's tax obligation incurred upon the vesting of such restricted stock award.

> /s/ Scott C. Folkers, Secretary, Winnebago Industries, Inc. 10/14/2013 under Power of Attorney

** 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.