FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	

STATEMENT	<b>OF CHANG</b>	ES IN BENEF	ICIAL OV	VNERSHIP

OMB APPROVAL 3235-0287 OMB Number: 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).

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*  West Christopher David												5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owne							
(Last) WINNE					3. Date of Earliest Transaction (Month/Day/Year) 10/10/2023								helow)	Officer (give title below)		Other (spec below) ERATIONS			
	ONEER TI	•	, iivo.				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	RAIRIE M	N !	55347		=									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	tate) (	(Zip)	Rule 10b5-1(c) Transaction Indication						<u>,                                     </u>									
					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.								d to						
		Tab	le I - No	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed o	of, or Be	neficia	lly Owned	t				
		Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos		Disposed	urities Acquired (A) o sed Of (D) (Instr. 3, 4		Benefic Owned	es ially Following	Form:	Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	nt (A) or Pri			eported ansaction(s) estr. 3 and 4)			instr. 4)		
Common Stock, \$.50 par value 10/10			)/2023	23		A		3,966 <sup>(1)</sup> A		\$0	29,	29,376 <sup>(2)</sup>		D					
Common Stock, \$.50 par value 10/10/.			)/2023	2023		A		4,636 A		\$58.6	58 34	34,012		D					
Common Stock, \$.50 par value 10/10/.				)/2023	023 F 1,479 D		\$58.6	8 32,533			D								
		Т									osed of converti			/ Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Day/Year) Or Exercise Price of Derivative Security  3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	is illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$58.68	10/10/2023			A		3,974		(3)	1	0/10/2033	Common Stock	3,974	\$58.68	3,974	,	D		

## Explanation of Responses:

- $1.\ Granted\ 10/10/2023\ under\ the\ Winnebago\ Industries,\ Inc.\ 2019\ Omnibus\ Incentive\ Plan.\ Restricted\ stock\ units\ vest\ in\ annual\ increments\ of\ one-third\ beginning\ on\ 10/10/2024.$
- 2. Reflects 27 shares acquired through the Winnebago Industries, Inc. Employee Stock Purchase Program.
- 3. Stock options vest in annual increments of one-third beginning on 10/10/2024.

/s/ Stacy L. Bogart, SVP, General Counsel and Secretary, 10/12/2023 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.