FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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

1. Name and Address of Reporting Person*  Krieger Daryl Wayne  (Last) (First) (Middle)						2. Issuer Name and Ticker or Trading Symbol     WINNEBAGO INDUSTRIES INC [ WGO ]      3. Date of Earliest Transaction (Month/Day/Year)										all app	er (give title		10% C Other below)	Owner (specify
WINNEBAGO INDUSTRIES, INC. P.O. BOX 152						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) FOREST CITY IA 50436  (City) (State) (Zip)					3,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,										_ine)					
(0.0)	(0.	,		n-Deriv	ative	Se	curiti	es Ac	quired	, Dis	posed o	f, o	r Ben	efic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execu Day/Year) if any			. Deemed ecution Date, iny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Sec Ben Owr		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, \$.50 par value 10/11					/2016						1,833(1)		A	\$27.89		42,814		]	D	
Common Stock, \$.50 par value 10/1				10/11/	1/2016						934		D	\$27.89		41,880		]	D	
Common Stock, \$.50 par value 10/1				10/11/	/11/2016				A		2,259(2	2)	A	\$27.89		44,139		]	D	
Common Stock, \$.50 par value 10/1				10/11/	0/11/2016				F		1,151		D	\$27.89		42,988		D		
Common Stock, \$.50 par value 10/11/				2016				A		4,000(3)		A	\$0.00(3)		46,988		]	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 (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution if any (Month/Day/Year)		Date, Transacti		Instr	n of Deri Sec Acq (A) Disp	oosed D) tr. 3, 4	Expiration (Month/I	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiratio Date			Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount of Manual Amount or Number of Security Instr.			ice of vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dire or I (I) (	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. Granted under the Winnebago Industries, Inc. 2014 Omnibus Equity, Performance Awards, and Incentive Compensation Plan which provides for stock grants to Executive Officers under the Officers' Incentive Compensation Plan for Fiscal Year 2016.
- 2. Granted under the Winnebago Industries, Inc. 2014 Omnibus Equity, Performance Awards and Incentive Compensation Plan which provides for stock grants to Executive Officers under the Officers' Long-Term Incentive Plan for Fiscal Three-Year Period 2014, 2015, and 2016.
- 3. Granted 10/11/16 under the Winnebago Industries, Inc. 2014 Omnibus Equity, Performance Awards, and Incentive Compensation Plan. Restricted shares vest in annual increments of one-third beginning

/s/ Scott C. Folkers, Secretary, Winnebago Industries, Inc.

10/13/2016

<u>under Power of Attorney</u>

\*\* 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.