FORM 4

obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| Section 16. Form 4 or Form 5           |  |
| abligations may continue Cos           |  |

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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*                      |  |          |           |         |               | 2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [ WGO ] |         |   |                                    |  |         |   |                     |                    | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                       |   |   |  |            |  |
|---|--|----------|-----------|---------|---------------|--|---------|---|------------------------------------|--|---------|---|---------------------|--------------------|---|-----------------------|---|---|--|------------|--|
| <u>Happe Michael J</u>  |  |          |           |         | 1             |  | ,LD:    | 001                                     | 11000                              |  | ILU IIV | <u> </u>  | , 00                | 1                  | X   | Direc                 | ctor  |   | 10% C  | wner       |  |
| (Last)  | (i   | First) ( | Middle)   |         | 3. D          | Date of Earliest Transaction (Month/Day/Year)                                |         |   |                                    |  |         |   |                     |                    | X   | Offic<br>belov        | er (give title<br>v)  |   | Other<br>below)  | (specify   |  |
| WINNEBAGO INDUSTRIES, INC.                                    |  |          |           | 10/     | 10/11/2017    |  |         |   |                                    |  |         |   |                     | 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                   |                       |   |   |  |            |  |
| (Street)  |  |          |           |         |               |  |         |   |                                    |  |         |   |                     | '                  | Line) X Form filed by One Reporting Person                              |                       |   |   |  |            |  |
| FOREST  | CITY I   | A 5      | 50436     |         |               |  |         |   |                                    |  |         |   |                     |                    | Form filed by More than One Reporting                                   |                       |   |   |  |            |  |
| (Oit )  |  | 24-4-2   | 7:>       |         | -             |  |         |   |                                    |  |         |   |                     |                    |   | Pers                  |   | re triair   | one rep  | orung      |  |
| (City)  | (;   | State) ( | Zip)      |         |               |  |         |   |                                    |  |         |   |                     |                    |   |                       |   |   |  |            |  |
|   |  | Tabl     | e I - Nor | า-Deriv | ative         | Se   | curitie | s Ac                                    | quired,                            | Dis  | posed o | f, or   | Bene                | eficia             | ally  | Owne                  | ed  |   |  |            |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |          |           |         | Execution Dat |  | n Date, | 3.<br>Transaction<br>Code (Instr.<br>8) |                                    | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3,<br>5) |         |   |                     | 4 and Secu<br>Bene |   | cially<br>I Following | Form:<br>(D) or I   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |            |  |
|   |  |          |           |         |               |  |         |   | Code                               | v  | Amount  | (   | (A) or<br>(D) Price |                    | Trans   |                       | action(s)<br>3 and 4)   |   |  | (111341.4) |  |
| Common Stock, \$.50 par value                                 |  |          |           | 10/11   | 11/2017       |  |         |   | D                                  |  | 2,297   | <sup>'(1)</sup> D   |                     | \$4                | \$43 2  |                       | ,682(2)   | ]   | D  |            |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |           |         |               |  |         |   |                                    |  |         |   |                     |                    |   |                       |   |   |  |            |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | Derivative Conversion Date Security or Exercise (Month/Day/Year) if any  |          |           |         |               | Transaction of Dec See (Instr. 8)  Code (Instr. 8)  See (A)  (A)  Dis  of (  |         | osed<br>)<br>:. 3, 4                    | 6. Date E<br>Expiratio<br>(Month/D | n Date   | е       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |                     | ount               |   |                       | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |  |
|   |  |          |           | Code    | v             | (A)  | (D)     | Date<br>Exercisal                       |                                    | Expiration<br>Date   | Title   | Nun<br>of<br>Sha  | nber<br>res         |                    |   |                       |   |   |  |            |  |

## **Explanation of Responses:**

- 1. Upon the annual incremental vesting of a restricted stock award granted 10/11/16 under the Winnebago Industries, Inc. 2014 Omnibus Equity, Performance Awards, and 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.
- 2. Represents total amount of Winnebago Stock Units held by reporting person in Winnebago Industries, Inc. as of reporting date.

/s/ Scott C. Folkers, Secretary, 10/16/2017 Winnebago Industries, Inc. 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.

- $^{\star}$  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.