FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

1	UMB APPROVAL												
	OMB Number:		3235-028	9									
-1													

37 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 an ERICK	2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [ WGO ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner									
(Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC.							Earliest	Trans	action (Mont	:h/Da	ay/Year)		Officer below)	(give title		Other (s below)	pecify		
P.O. BOX 152						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) FOREST	Street) FOREST CITY IA 50436		50436			X Form fi								filed by One Reporting Person filed by More than One Reporting n					
(City) (State) (Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			Transaction Disposed Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4 a		Benefici	es Formally (D) (3 Following (I) (I		: Direct   C Indirect   E str. 4)   C	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code V	,	Amount	(A) or (D) Price		Transact (Instr. 3	tion(s)			iiisu. 4)		
	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	se (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, Transact Code (In					6. Date Exercis Expiration Date (Month/Day/Yea			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)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	Amount or Number of Shares						
Winnebago Stock Units <sup>(1)</sup>	(1)	12/31/2007			A		243 <sup>(2)</sup>		(1)		(1)	Common Stock	243(2)	\$21.01	4,324 <sup>(3</sup>	3)	D		

## **Explanation of Responses:**

- 1. Winnebago Stock Units are accrued under the Winnebago Industries, Inc. Directors Deferred Compensation Plan and are to be settled 100% in Winnebago common stock upon the earliest of the following events: reporting person's termination of service as a director, death, disability or a "change in the effective control of the Company" as defined in the Plan pursuant to an election made by reporting person on
- 2. Represents amount of Winnebago Stock Units acquired by reporting person on the transaction date.
- 3. Represents total amount of Winnebago Stock Units held by reporting person in Winnebago Industries, Inc. Directors Deferred Compensation Plan as of reporting date.

/s/ Raymond M. Beebe, Secretary, Winnebago

01/02/2008

Industries, Inc. under Power of <u>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.