FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Si	ee Instruction 1	0.																		
1. Name and Address of Reporting Person* BOGART STACY L					2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
				IJ										Officer (give title below)			Other (s	specify		
(Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC. 13200 PIONEER TRAIL					3. Date of Earliest Transaction (Month/Day/Year) 10/10/2024									SVP-GENERAL COUNSEL						
(Street) EDEN PRAIRIE MN 55347 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	efici	ally Ov	/ned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Date,	Transaction Disposed Of (Code (Instr. 5)			es Acquired (A) o Of (D) (Instr. 3, 4			nd Sec Ben Owr	mount of urities eficially led Following	Forr (D) (m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code V		Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, \$.50 par value 10/10/2					2024				F		498(1)	I)	\$56 .	55	14,150 ⁽²⁾		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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				saction a (Instr. b (Instr. 3, 4 and 5) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		J	8. Price Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount nber ires						

Explanation of Responses:

- 1. Upon the annual incremental vesting of a restricted stock unit award granted 10/10/2023 under the Winnebago Industries, Inc. 2019 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 the reporting person's tax obligation incurred upon the vesting of such restricted stock unit award.
- 2. Reflects a correction as a previously-reported sale of 3,333 shares by the reporting person on 7/25/2024 did not actually occur

10/11/2024

** 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.