SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
bligations may continue. See
nstruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

			of Section 30(n) 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)					
KITCH GERA	<u>ALD C</u>		<u></u>	X	Director	10% Owner			
(Last) WINNEBAGO I	(First) NDUSTRIES, INC	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2009		Officer (give title below)	Other (specify below)			
P.O. BOX 152			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 Report	ting Person			
FOREST CITY	IA	50436			Form filed by More than (Person	m filed by One Reporting Person m filed by More than One Reporting son			
(City)	(State)	(Zip)							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									

								1		
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			d Securities Form: Beneficially (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price			(1150.4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of Derivative 5. Number of 7. Title and Amount 3. Transaction 3A. Deemed 6. Date Exercisable and 8. Price of 9. Number of 10. 11. Nature Execution Date, if any (Month/Day/Year) of Securities Underlying Derivative Security Conversion Transaction Code (Instr. Expiration Date (Month/Day/Year) Date Derivative Securities Derivative derivative Ownership of Indirect Security (Instr. 3) Security (Instr. 5) or Exercise (Month/Dav/Year) Securities Form Beneficial Price of 8) Beneficially Direct (D) Acquired (A Ownership or Disposed of (D) (Instr. 3, 4 and 5) Owned Following Reported Derivative (Instr. 3 and 4) or Indirect (Instr. 4) Security (I) (Instr. 4) Transaction(s) (Instr. 4) Amount or Number Date Expiration of Shares ν Code (A) (D) Exercisable Title Date Winnebago Stock

(1)

Explanation of Responses:

Units⁽¹⁾

(1)

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 12/01/08

2. Represents amount of Winnebago Stock Units acquired by reporting person on the transaction date.

03/31/2009

3. Represents total amount of Winnebago Stock Units held by reporting person in Winnebago Industries, Inc. Directors Deferred Compensation Plan as of reporting date.

1.017⁽²⁾

/s/ Raymond M. Beebe, Secretary, Winnebago Industries, Inc. under Power of

1,017(2)

\$5.315

32,796⁽³⁾

04/01/2009

D

Attorney

Commo

Stock

(1)

** 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.

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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.