Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

1. Name and Address of Reporting Person* <u>Fisher William C.</u>				2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO]								(Che	eck all appli X Directo	nship of Reporting P applicable) Director Officer (give title below)		10% O	wner		
(Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC.				3. Date of Earliest Transaction (Month/Day/Year) 03/29/2018									Officer below)			Other (: below)	specify		
P.O. BOX 152			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) FOREST	CITY IA		50436												X Form f	iled by One iled by More 1	•	Ü	
(City)	(S	tate) (Zip)																
		Tab	e I - Non	-Deriv	ative	Sec	curities	s Ac	quired,	Dis	posed o	f, or Be	enet	ficiall	y Owned	l .			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 5)				5. Amou Securitie Beneficia Owned F Reported	es Fo ially (D) Following (I)		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) (D)	or I	Price	Transact (Instr. 3 a	ion(s)			(111511.4)
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 On Date (Month/Day/Year) Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)				Date,	Transaction Code (Instr. 8) Securi Acquii (A) or Dispos of (D)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nu of	nount Imber ares					
Winnebago Stock Units	(1)	03/29/2018			A		178 ⁽²⁾		(1)		(1)	Common Stock	1	78 ⁽²⁾	\$37.6	6,051 ⁽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 11/13/2017.
- $2. \ Represents \ amount \ of \ Winnebago \ Stock \ Units \ acquired \ by \ reporting \ person \ on \ the \ transaction \ date.$
- 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/ Scott C. Folkers, Senior Counsel for Winnebago Industries, Inc. under Power of

04/02/2018

Attorney

** 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.