FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APP | ROVAL |
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| :LUD | OMB Number: | 3235-02 |

287 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 and Address of Reporting Person* <u>ERICKSON LAWRENCE A</u> | | | | 2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO] | | | | | | | |)] (Ch | 5. Relationship of Reporting Person(s) (Check all applicable) X Director 1 | | | | uer /ner | |
|--|---|------------|---|---|---|------|--|--------|--|------------------|----------------|---|---|---|---|--------------------|--|---------------------------------------|
| (Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/31/2009 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| P.O. BOX (Street) FOREST | CITY IA | | 50436 | | 4. If | Amen | ndment, [| Date o | of Original Fil | ed (M | Month/Da | ay/Year) | Lin | X Form f | iled by One iled by Mor | e Repo | (Check Apporting Person One Repor | 1 |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non-l | Deriva | ative | Sec | urities | Ac | quired, D | ispo | osed o | f, or Be | neficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | Date | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | Benefici | s ally following | Form (D) or | orm: Direct | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code V | F | Amount | (A) or (D) Price | | Transact (Instr. 3 | tion(s) | | | (Instr. 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 | | 3A. Deemed Execution Date, if any (Month/Day/Year) | ate, T | 4. Transaction Code (Instr. 8) | | | | 6. 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 Beneficial Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | Exp | piration te | Title | Amount or Number of Shares | | | | | |
| Winnebago Stock Units ⁽¹⁾ | (1) | 08/31/2009 | | | A | | 275 ⁽²⁾ | | (1) | | (1) | Common Stock | 275(2) | \$11.735 | 13,188 ⁽ | (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 Industries, Inc. under Power of

09/02/2009

<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.