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**

Machinatan	D C	20540	
Washington,	D.C.	20549	

<b>STATEMENT</b>	OF CHANGES IN	I 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									
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or the purchase or sale of equity ecurities of the issuer that is stended to satisfy the affirmative
efense conditions of Rule 10b5-

Instruction 1(b).

Name and Address of Reporting Person*  Woodson Bret A						2. Issuer Name <b>and</b> Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [ WGO							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Woods	on Bret A	<u>L</u>			11								Direc	tor		10% O	wner		
(Last)	/Eir	rot) (N	Aiddla)									B	Office below	er (give title v)		Other (below)	specify		
(Last) (First) (Middle)						te of F	arliest	Trans	action (I	Month	/Day/Year)			1	SVP-HUMAN RESOURCES				S
WINNEBAGO INDUSTRIES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 10/12/2024													
13200 PIONEER TRAIL																			
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line	,		_		
EDEN	, M	N 5	5347											1		filed by On		•	
PRAIRII 															Form Perso	i filed by Mo on	re tha	n One Rep	orting
(City)	(St	ate) (Z	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, Code (Instr. 5)					ties	6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial			
(Month/Da						nth/Day/Year)		8)		3,	5)		Owne		d Following (I)		(Instr. 4)	Ownership	
								Code	v	Amount	(A) (D)	or Price		Report Transa (Instr.	nsaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock, \$.50 par value 10/12/2					2024		F		236(1)	Г	) {	58.1	31,143			D			
Common	Stock, \$.50	) par value		10/12/2	2024				F		29(1)	Г	) {	58.1	4 3	31,114		D	
		Tal									osed of,				/ Owne	d			
				(e.g., pu	its, ca	alis, v	warra	ants,	optio	ns, c	onvertib	ie se	curii	ies)					
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any Cod		Transa Code (				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		1	3. Price of Derivative Security Instr. 5)	ivative derivative urity Securities	Owner Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code			Date Exercis	sable	Expiration Date	Title	Amo or Num of Shar	ber						

## **Explanation of Responses:**

1. Upon the annual incremental vesting of a restricted stock unit award granted 10/12/2021 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.

> /s/ Stacy L.Bogart, Attorney-10/15/2024 in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.