FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burd	len							
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).

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*  ERICKSON LAWRENCE 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)  X Director 10% Owner					
(Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2009								Office below	r (give title		Other (s below)	pecify	
P.O. BOX 152					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) FOREST	Street) FOREST CITY IA 50436		50436			X Form filed by One Report Form filed by More than C Person									•				
(City) (State) (Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,			Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Benefici	s Forn lly (D) o ollowing (I) (Ir		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code V		Amount	(A) or (D)	Price	Transac	Transaction(s) (Instr. 3 and 4)			(111501.4)		
	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	ate, Ti	4. Transactic Code (Ins 8)				6. Date Exercisa Expiration Date (Month/Day/Year		Amount of		f s g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				С	Code	v	(A)	(D)	Date Exercisable	Ex <sub> </sub>	piration te	Title	Amount or Number of Shares						
Winnebago Stock Units <sup>(1)</sup>	(1)	09/30/2009			A		180 <sup>(2)</sup>		(1)		(1)	Common Stock	180(2)	\$14.465	13,368 <sup>0</sup>	(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 12/01/09
- 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

10/01/2009

Attorney

\*\* Signature of Reporting Person Date

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

- \* 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.