FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028
Estimated average t	ourden

0.5

hours per response:

	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

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 an		of Reporting Person*							er or Tra		Symbol IES INC	<u>C</u> ['	WGO				p of Reportin plicable)		s) to Is	
(Last) WINNEE P.O. BOX	BAGO IN	First) ((Middle)				of Earlies 2012	t Trans	action (M	lonth/	Day/Year)				X		er (give title w)			specify
(Street) FOREST (City)			50436 (Zip)		4. If	Ame	endment,	Date o	f Original	l Filed	I (Month/Da	ay/Ye	ar)		Indivine)	Form	r Joint/Group n filed by One n filed by Mor on	e Reportin	g Pers	on
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Acc	uired,	Dis	posed o	f, o	r Ben	eficia	ally (Owne	ed			
1. Title of S	Security (In	str. 3)		2. Transa Date (Month/D		ır) I	2A. Deem Execution if any (Month/D	n Date,	3. Transa Code (8)		4. Securit Disposed 5)				nd	5. Amo Securi Benefi Owned Report	ties cially I Following	6. Owner Form: Dir (D) or Ind (I) (Instr.	rect lirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Price		Transa	action(s) 3 and 4)			(msu. 4)
Common	Stock, \$.5	0 par value		10/10	/2012				A		2,000	1)	A	\$ 0 .	00	7	5,610	D		
		Та	able II - D								sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (l 8)		n of	ative rities ired osed	6. Date E Expiratio (Month/D	n Dat		Amo Sec Und Deri	Am	str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Inc (I) (In	: t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	of	nber res						

Explanation of Responses:

1. Granted under the Winnebago Industries, Inc. 2004 Incentive Compensation Plan. Restricted awards are vested upon termination of services as a director.

/s/ Scott C. Folkers, Secretary,

<u>Winnebago Industries, Inc.</u> <u>10/11/2012</u> <u>under Power of 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.

LIMITED POWER OF ATTORNEY

BE IT KNOWN, that Robert J. Olson has made and appointed, and by these presents does make and appoint, Scott C. Folkers, acting individually, in his capacity as compliance officer for Winnebago Industries, Inc., true and lawful attorney for him and in his name, place and stead, for the following specific and limited purposes only:

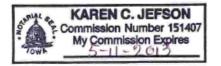
To sign any and all documents required by the Securities and Exchange Commission to ensure compliance with the rules and regulations thereof by me in connection with any transactions I may complete involving the stock of Winnebago Industries, Inc.

giving and granting said attorney full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises set out herein as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have hereunto set my hand this 9th day of October, 2012.

/s/ Robert J. Olson Robert J. Olson	_
1105011 51 015011	

The foregoing instrument was acknowledged by me this 9th day of October, 2012, by Robert J. Olson who is personally known by me and who did not take an oath.



STATE OF IOWA

COUNTY OF HANCOCK

/s/ Karen C. Jefson
Notary Public (SEAL)
State of IOWA
My Commission Expires: 5-11-2013