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Form 4											
June 01, 2010											
FORM 4	UNITED	STATES	SECU	RITIES 4	AND EX	CHANGE	COMMISSIO	т	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or	Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 average urs per . 0.5		
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Section 17(a) of the l	Public U	Itility Hol	ding Cor		nge Act of 1934, of 1935 or Section 940	on			
(Print or Type Respon	nses)										
1. Name and Address of Reporting Person <u>*</u> KITCH GERALD C			2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC				5. Relationship of Reporting Person(s) to Issuer				
[WC					INDUST	KIES INC	(Check all applicable)				
			3. Date of Earliest Transaction (Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify				
WINNEBAGO I INC., P.O. BOX	05/28/2010				below) below)						
				endment, D onth/Day/Yea	-	1	6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
FOREST CITY,					Form filed by More than One Reporting Person						
(City) (a	State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	nsaction Date th/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V		(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on	a separate line	for each cl	ass of sec	urities bene	ficially own	ned directly o	or indirectly.				
					inforn requir	nation cont red to respo lys a currer	pond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tabl					posed of, or	Beneficially Owner	I			

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pri
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof	Expiration Date	Underlying Securities	Deriv

1

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	(Instr. 8) Securi Acqui (A) or Dispo of (D)		(D) (str. 3, 4,		(Instr. 3 and 4)		Secur (Instr	
				Code V	V	(A) (· /	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Winnebago Stock Units	<u>(1)</u>	05/28/2010		А		206 (2)		<u>(1)</u>	<u>(1)</u>	Common Stock	206 <u>(2)</u>	\$ 12

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips					
	Director	10% Owner	Officer	Other				
KITCH GERALD C WINNEBAGO INDUSTRIES, INC. P.O. BOX 152 FOREST CITY, IA 50436	Х							
Signatures								
/s/ Raymond M. Beebe, Secretary, W. Attorney	r Power of 06/01/2010							

**Signature of Reporting Person

Explanation of Responses:

* 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).

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,

- (1) Too n in white age common stock upon the carnest 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 12/16/09.
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Date