## Edgar Filing: CHIUSANO ROBERT M - Form 4

CHIUSAN	O ROBERT M									
Form 4										
November	01, 2011									
FORM		ст і тес	SECU	DITIES		CHANCE	COMMISSION		PPROVAL	
Check this box									3235-0287	
if no lo	nger				DENIER			Expires:	January 31, 2005	
subject to Section 16. Form 4 or							WNERSHIP OF	Estimated burden ho response.	average urs per	
Form 5 obligati may co <i>See</i> Inst 1(b).	ntinue. Section 17(	a) of the l	Public U	Itility Hol	ding Co		nge Act of 1934, of 1935 or Sectio 940	•		
(Print or Type	e Responses)									
1. Name and CHIUSAN	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)					
(Last)	(First) (I	Middle)	-	-	ransaction		X Director	10	% Owner	
WINNEBA INC., P.O.	3. Date of Earliest Transaction (Month/Day/Year) 10/31/2011				Officer (give titleOther (specify below)					
				endment, D onth/Day/Yea	-	al	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
FOREST	CITY, IA 50436						Person		toporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Price				
Reminder: Re	eport on a separate line	for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.			
					inforr requi	nation cont red to resp ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	i are not rm	SEC 1474 (9-02)	
	Tab					posed of, or	Beneficially Owned	I		

(e.g., puts, calls, warrants, options, convertible securities)

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

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	8)			uired or posed D) tr. 3, 4,		(Instr. 3 and 4)		Secur (Instr
				Code '	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Winnebago Stock Units		10/31/2011		А		734 (2)		<u>(1)</u>	<u>(1)</u>	Common Stock	734 <u>(2)</u>	\$ 8

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	ips					
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other				
CHIUSANO ROBERT M WINNEBAGO INDUSTRIES, INC. P.O. BOX 152 FOREST CITY, IA 50436	Х							
Signatures								
/s/ Raymond M. Beebe, Secretary, W Attorney	r Power of 11/01/2011							

<u>\*\*</u>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 12/15/2010.
- (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