Edgar Filing: CHIUSANO ROBERT M - Form 4

CHIUSAN	O ROBERT M									
Form 4										
November (
FORM	A 4 UNITED	STATES					COMMISSIO		3235-0287	
Check this box Washington, D.C. 20549									January 31,	
if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									2005	
Section	subject to Section 16. SECURITIES Form 4 or								average urs per . 0.5	
Form 5 obligation may con <i>See</i> Inst 1(b).	ons Section 17(a) of the I	Public U	Itility Hol		pany Act	nge Act of 1934, of 1935 or Secti 940			
(Print or Type	Responses)									
CHIUSANO ROBERT M S				EBAGO I	d Ticker or '	C	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(1 +)	(Einst)	A. I.	[WGO]	-			V Dimeter	10		
				3. Date of Earliest Transaction (Month/Day/Year) 10/31/2012			_X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street)		. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
FOREST C	CITY, IA 50436						Person		eporting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	Securities A	cquired, 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) 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: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially own	ed directly o	or indirectly.			
					Persor inform require	ns who res ation cont ed to respo ys a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab	le II - Deriv	ative Sec	curities Acq	uired, Disp	oosed of, or	Beneficially Owned	1		

(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. 3	8)			es d d		(Instr. 3 and 4)		Secur (Instr
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Winnebago Stock Units	<u>(1)</u>	10/31/2012		А		536 (2)		(1)	<u>(1)</u>	Common Stock	536 <u>(2)</u>	\$ 12

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips		
r g i i i i i i i i i i i i i i i i i i	Director	10% Owner	Officer	Other	
CHIUSANO ROBERT M WINNEBAGO INDUSTRIES, INC. P.O. BOX 152 FOREST CITY, IA 50436	Х				
Signatures					
/s/ Scott C. Folkers, Secretary, Winne Attorney	11/01/2012				

**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 is 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 12/14/2011.
- (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