Rohrkaste Michael K. Form 3 January 07, 2010

## FORM 3

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

3235-0104

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Rohrkaste Michael K.

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

01/01/2010

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

OSHKOSH CORP [OSK]

(Check all applicable)

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O OSHKOSH CORPORATION, Â 2307 OREGON STREET

(Street)

Director \_X\_\_ Officer

10% Owner

Other (give title below) (specify below) Exec VP & Chief Admin Offcr

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One Reporting Person

OSHKOSH, Â WIÂ 54902

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial

1. Title of Security (Instr. 4)

Beneficially Owned

(Instr. 4)

3. Ownership

Ownership (Instr. 5)

Form: Direct (D) or Indirect (I)

Common Stock

 $8,702.37 \frac{(1)}{}$ 

(Instr. 5) Â D

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(Instr. 4)

**Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. 5. Ownership Conversion or Exercise Form of

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

Price of Derivative Derivative Security:

### Edgar Filing: Rohrkaste Michael K. - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Option (2)	(3)	10/19/2015	Common Stock	2,500	\$ 41.04	D	Â
Option (2)	(4)	10/18/2016	Common Stock	2,500	\$ 49.98	D	Â
Option (2)	(5)	10/17/2017	Common Stock	10,000	\$ 54.63	D	Â
Option (2)	(6)	10/16/2018	Common Stock	15,000	\$ 12.04	D	Â
Option (2)	(7)	09/14/2016	Common Stock	20,000	\$ 32.1	D	Â

# **Reporting Owners**

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other

Rohrkaste Michael K. C/O OSHKOSH CORPORATION 2307 OREGON STREET OSHKOSH, WIÂ 54902

Â Êxec VP & Chief Admin Offcr Â

### **Signatures**

Michael K. Rohrkaste 01/07/2010

\*\*Signature of Date
Reporting Person

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) 6,407 shares included in the total are Restricted Shares granted to Reporting Person on November 16, 2009, subject to certain vesting and forfeiture provisions.
- (2) Option (right to buy) granted pursuant to the Company's Stock Plan.
- (3) Options vest in one-third (1/3) annual increments commencing on 09/19/2006.
- (4) Options vest in one-third (1/3) annual increments commencing on 09/18/2007.
- (5) Options vest in one-third (1/3) annual increments commencing on 09/17/2008.
- (6) Options vest in one-third (1/3) annual increments commencing on 09/16/2009.
- (7) Options vest in one-third (1/3) annual increments commencing on 09/14/2010.

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.

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