## OSHKOSH CORP

Form 4
March 02, 2015

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

OMB Number:
Expires: January 31,
Estimated average burden hours per response...
(Print or Type Responses)

| 1. Name and Address of Reporting Person *KIMMITT JOSEPH H |  |  | 2. Issuer Name and Ticker or Trading Symbol OSHKOSH CORP [OSK] |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) |
| C/O OSHKOSH |  |  | 02/26/2015 |
| CORPORATION, 2307 OREGON |  |  |  |
| STREET |  |  |  |

(Street)
4. If Amendment, Date Original
Filed(Month/Day/Year)
5. Relationship of Reporting Person(s) to Issuer
(Check all applicable)

| Director | 10\% O |
| :---: | :---: |
| $\square_{\text {below) }}^{\text {X_Officer (give title }}$ | Other (specify |
|  | below) |
| Executive V | ice President |

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, WI 54902
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. <br> Transactio <br> Code <br> (Instr. 8) <br> Code V | 4. Securities <br> nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) <br> (A) or <br> Amount <br> (D) P | 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 class of securities beneficially owned directly or indirectly.


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

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number of | 6. Date Exercisable and | 7. Title and Amount of | 8.1 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | TransactiorDerivative | Expiration Date | Underlying Securities | De |  |


| Security <br> (Instr. 3) | or Exercise <br> Price of Derivative Security |  | any <br> (Month/Day/Year) | Code <br> (Instr. 8) | Securities <br> Acquired (A) or Disposed of (D) <br> (Instr. 3, 4, and 5) | (Month/Day | Year) | (Instr. 3 and |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | Code V | (A) (D) | Date <br> Exercisable | Expiration <br> Date | Title | Amount <br> or <br> Number <br> of Shares |
| Restricted <br> Stock <br> Units | (1) | 02/26/2015 |  | A | 10.072 | (2) | (2) | Common Stock | 10.072 |
| Restricted <br> Stock <br> Units | (1) | 02/26/2015 |  | A | 15.108 | (3) | (3) | Common Stock | 15.108 |

## Reporting Owners

Reporting Owner Name / Address
Director $10 \%$ Owner Officer Other

KIMMITT JOSEPH H
C/O OSHKOSH CORPORATION
2307 OREGON STREET
OSHKOSH, WI 54902

## Signatures

Bryan J. Blankfield, for Joseph H. Kimmitt

02/27/2015
**Signature of Reporting Person
Date

## 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. $78 \mathrm{ff}(\mathrm{a})$.
(1) Each Restricted Stock Unit represents a contingent right to receive one share of OSK common stock.
(2) The Restricted Stock Units acquired will be settled proportionately with the Restricted Stock Units Award originally granted on 9/16/2013.
(3) The Restricted Stock Units acquired will be settled proportionately with the Restricted Stock Units Award originally granted on 9/15/2014.
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.

