### FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
am			O	SHK	KOSH	CORP	<b>O</b>	SK]				,	100/	Owner	
t) (First)	) (M	iddle)	3.	3. Date of Earliest Transaction (MM/DD/YYYY)											
C/O OSHKOSH CORPORATION, 1917 FOUR WHEEL DRIVE				10/16/2023									· —	()	
			4.	If Am	nendme	nt, Date O	rigir	nal Filed	d (MM/DI	D/YYYY	7) 6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
OSHKOSH, WI 54902												X Form filed by One Reporting Person Form filed by More than One Reporting Person			
37	, (	. /	Non-Dei	rivati	ive Secu	ırities Acq	μire	ed, Dis <sub>l</sub>	posed o	f, or B	eneficially Owne	ed			
1.Title of Security (Instr. 3)		2. Tr	2. Trans. Date		ution	3. Trans. Code (Instr. 8)		or Dispo	sed of (D)					Ownership Form: I Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		10	11 ( /2022			Code	V		( )	Price			12.012.440	4)	
								7	+					ļ	
								+		-	1				
						F		851	D					D	
Tab	le II - Der			Bene	eficially	Owned (a	e.g.,	puts, c	alls, wa	1		tible secu		l	
2. Conversion or Exercise	3. Trans. Date	3A. Deemed Execution Date, if any			Derivativ	ve Securities I (A) or				Securit Derivat	ies Underlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially	Form of	11. Nature of Indirect Beneficial Ownership
(	OSH COI EEL DRIV (Street, WI 5490 City) (Sta	Table II - Der	Comparison   Com	Dam	OSH   OSH   OSH   CORPORATION, 1917   SEL DRIVE   (Street)   4. If An   An   An   An   An   An   An   An	OSHKOSH   OSHKOSH   Same   OSHKOSH   OSH CORPORATION, 1917   EEL DRIVE   (Street)   4. If Amendment   Amendment   OSH (State)   OSH (State)	OSHKOSH CORP	OSHKOSH CORP   OSHKOSH CORP   OSHKOSH CORP   OSH CORPORATION, 1917	OSHKOSH CORP [ OSK ]  Director X_Officer (gi SVP/Chief In Director)  OSH CORPORATION, 1917  EEL DRIVE  (Street)  A. If Amendment, Date Original Filed (MM/DD/YYYY)  (State) (Zip)   Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owner (Instr. 8)  Director X_Officer (gi SVP/Chief In SvP/Chie	OSHKOSH CORP [ OSK ]    OSH CORPORATION, 1917   10/16/2023   SVP/Chief Informatio	OSHKOSH CORP [ OSK ]    OSHKOSH CORP [ OSK ]	OSHKOSH CORP [ OSK ]  (Check all applicable)  Director			

### **Explanation of Responses:**

- (1) Shares issued pursuant to the ROIC-based Performance Shares previously granted under the Company's 2017 Incentive Stock and Awards Plan for the performance period October 1, 2020 through September 30, 2023 (which takes into account performance through June 30, 2023).
- (2) Shares issued pursuant to the TSR-based Performance Shares previously granted under the Company's 2017 Incentive Stock and Awards Plan for the performance period October 1, 2020 through September 30, 2023.
- (3) The amount beneficially owned includes shares acquired pursuant to dividend reinvestments in exempt transactions not required to be reported pursuant to Section 16(a).

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Khare Anupam C/O OSHKOSH CORPORATIO 1917 FOUR WHEEL DRIVE OSHKOSH, WI 54902	N		SVP/Chief Information Officer					

Signatures

#### Ignacio A. Cortina, for Anupam Khare

10/17/2023

\*\*Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.