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.

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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 *					Issue	er Name	e and Tick	er or	Tradi	ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
McTague Em	ıma M			OS	SHI	KOSF	I CORP	[0	SK]				,	100	. 0	
(Last)	(First) (Mie	ddle)	3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)						()	Director 10% Owner X Officer (give title below) Other (specify below)				
C/O OSHKOSH CORPORATION, 1917 FOUR WHEEL DRIVE							2/1	1/20	24		SVP and Chi		· —	ner (specify	below)	
FOOR WILE	(Stre			4.]	If An	nendme	ent, Date C	rigi	nal Fil	ed (MM/I	DD/YYYY)	6. Individual of	or Joint/G	roup Filing	(Check App	icable Line)
OSHKOSH, WI 54902												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Sta	te) (Zip)									Tomi med by	Wiore man	one Reporting I	CISOII	
			Table I - N	on-Der	ivat	ive Sec	curities Ac	quir	ed, Di	sposed o	of, or Be	neficially Owne	d			
1. Title of Security (Instr. 3)			2. Tra	I		Deemed ution , if any	3. Trans. Co (Instr. 8)	de	or Dis	posed of (E 3, 4 and 5))) ` ` `	5. Amount of Securit Following Reported (Instr. 3 and 4)	ities Beneficially Owned I Transaction(s)		Ownership Form: Be Direct (D) Ov	Beneficial Ownership
							Code	V	Amou	(A) or	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock			2/1	/2024			M		942.3	4 A	\$112.72			5,816.702 (1)	D	
Common Stock			2/1	/2024			F		49.	3 D	\$112.72			5,323.702	D	
	Tab	le II - Der	ivative Sec	urities	Ben	eficiall	y Owned (e.g.,	puts,	calls, w	arrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	or Indirect	
Restricted Stock Units	(2)	2/1/2024		M			942.34	2/1	/2024	(3)	Commo Stock	n 942.34	\$0	0	D	

Explanation of Responses:

- (1) The Amount of Securities Beneficially Owned includes shares acquired pursuant to dividend reinvestments exempt from Section 16 pursuant to Rule 16a-11. The Amount of Securities Beneficially Owned has also been decreased to reflect the fact that the Reporting Person???s most recent filing erroneously included 92.404 shares relating to dividend equivalents on unvested Restricted Stock Units.
- (2) Each Restricted Stock Unit represents a contingent right to receive one share of OSK common stock.
- (3) Restricted Stock Unit Award vests in one-third (1/3) annual increments commencing on 2/1/2022.

Reporting Owners

reporting owners										
Reporting Owner Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
McTague Emma M										
C/O OSHKOSH CORPORATION			SVP and Chief HR Officer							
1917 FOUR WHEEL DRIVE		SVF and Chief HK On								
OSHKOSH, WI 54902										

Ignacio A. Cortina, for Emma M. McTague

2/5/2024

**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.