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

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

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# 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 <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
McTague Emma M	OSHKOSH CORP [ OSK ]	
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	Director 10% Owner   X_Officer (give title below) Other (specify below)
C/O OSHKOSH CORPORATION, 1917	3/2/2023	SVP and Chief HR Officer
FOUR WHEEL DRIVE		
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)
OSHKOSH, WI 54902		X Form filed by One Reporting Person Form filed by More than One Reporting Person
(City) (State) (Zip)		

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

				-	-			-		
1.Title of Security	2. Trans. Date	2A. Deemed	3. Trans. Co	de	4. Securit	ies Acquire	ed (A)	5. Amount of Securities Beneficially Owned	6.	7. Nature
(Instr. 3)		Execution	(Instr. 8)		or Dispos	ed of (D)		Following Reported Transaction(s)	Ownership	of Indirect
		Date, if any			(Instr. 3, 4	and 5)		(Instr. 3 and 4)	Form:	Beneficial
		-							Direct (D)	Ownership
									or Indirect	(Instr. 4)
						(A) or			(I) (Instr.	
			Code	V	Amount	(D)	Price		4)	

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

(Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)				6. Date Exercisable and Expiration Date		e Securities Underlying		Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s)	Direct (D) or Indirect (I) (Instr. 4)	
Restricted Stock Units	(1)	3/2/2023		Α		3.602		<u>(2)</u>	(2)	Common Stock	3.602	\$0	800.487	D	
Restricted Stock Units	<u>(1)</u>	3/2/2023		Α		4.183		<u>(3)</u>	<u>(3)</u>	Common Stock	4.183	\$0	929.601	D	
Restricted Stock Units	<u>(1)</u>	3/2/2023		Α		4.672		<u>(4)</u>	<u>(4)</u>	Common Stock	4.672	\$0	1,038.137	D	
Restricted Stock Units	(1)	3/2/2023		Α		14.421		<u>(5)</u>	<u>(5)</u>	Common Stock	14.421	\$0	2,141.154	D	

#### **Explanation of Responses:**

- (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 11/16/2020.
- (3) The Restricted Stock Units acquired will be settled proportionately with the Restricted Stock Units Award originally granted on 2/1/2021.
- (4) The Restricted Stock Units acquired will be settled proportionately with the Restricted Stock Units Award originally granted on 11/15/2021.
- (5) The Restricted Stock Units acquired will be settled proportionately with the Restricted Stock Units Award originally granted on 2/21/2022.

### Reporting Owners

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

#### Signatures

## Ignacio A. Cortina, for Emma M. McTague

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.