FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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Check this box if no longer subject	STATEMENT OF
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuar

## F CHANGES IN BENEFICIAL OWNERSHIP

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

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

Name and Address of Reporting Person*     Stevens Edward A					2. Issuer Name and Ticker or Trading Symbol JOHNSON OUTDOORS INC [ JOUT ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner							
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/29/2024								Office below	er (give title v)		Other (s below)	specify			
555 MAIN STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)														X	X Form filed by One Reporting Person					
RACINE	E WI	5	3403											Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Ž	Zip)		Rul	Rule 10b5-1(c) Transaction Indication								,						
					Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ir							a contract, instruction or written plan that is intended to struction 10.					nded to			
		Table	I - Noı	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	3enef	iciall	ly Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Exec ay/Year) if an		Deemed ecution Date, ny onth/Day/Year)				es Acquired (A) o Of (D) (Instr. 3, 4			Benefic Owned	ies cially Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 02/29/.					2024			Α		2,409(1)		A	\$ <mark>0</mark>	9,	369(2)		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transaction 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 (Month/Day/Year)			Amor Secu Unde Deriv Secu	Title and mount of ecurities nderlying erivative ecurity (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code V (A		(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							

## **Explanation of Responses:**

- 1. The reporting person received an award of shares of restricted stock, all of which shares vest on the first anniversary of the date of grant (i.e., March 1, 2025).
- 2. The number of securities beneficially owned following the reported transaction does not include 1,140 shares of Class A Common Stock of the issuer underlying an award of restricted stock units previously granted to the reporting person, which have vested on or prior to the date of this report but for which an election has been made by the reporting person to defer receipt of the underlying shares.

/s/ Eric Hagemeier, via Power of Attorney

03/04/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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 Number.