FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasinington, D.C. 2004

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
1	hours per respense:	0.5								

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

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

	nd Address of	Reporting Person*	LICITATE ON OTTED CODE TALE I TOTAL AND CARDON						ng Pers												
(Last) 555 MA	(F IN STREET		03	3/10/				`				below)	(give title		below)						
(Street) RACINE WI 53403 (City) (State) (Zip)					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Oity)			ble I - No	n-Deri	vativ	/e S	ecuriti	es A	Acar	uired.	Disi	oosed	of. or	Ben	eficiall	v Owned					
1. Title of	Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		n	2A. Deemed Execution Date, if any (Month/Day/Year)		ite,	3. Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			(A) or	5. Amount Securities Beneficial Owned Fo	ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amour	nt	A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)					
Class A (Common St	ock		12/0)5/20	03				G	V	25	5	D	\$0	32,2	.88	I	O ⁽¹⁾		
Class A (Common St	ock		03/1	0/20	04				A		50	3	A	\$0	3,018,930				By husband ⁽²⁾	
			Table II -				curitie Is, wa									Owned		,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	i. Fransaction Code (Instr. B)		of I		Expi	ate Exer iration D nth/Day/	ate	e and 7. Title and Amoun Securities Underly Derivative Security (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
				(Code	v	(A)	(D)	Date Exer	e rcisable	Exp Dat	oiration e	Title	Nu	ount or mber of ares						
Option (right to buy)	\$19.88	03/10/2004			A		1,950		03/1	10/2005	03/1	10/2014	Class . Commo Stock	on i	1,950	\$0	1,95	50	I	By husband ⁽²⁾	
Class B Common Stock	\$0.0000 ⁽³⁾									(3)		(3)	Class . Commo Stock	on 1	31,036		131,0)36	I	By husband ⁽²⁾	
Class B Common Stock	\$0.0000 ⁽³⁾									(3)		(3)	Class . Commo Stock	on 1,0	37,330		1,037,	330	I	By Voting Trust ⁽⁴⁾	
Option (right to buy)	\$6.2815								02/0	01/2002	02/0	01/2011	Class A Commo Stock	on	3,000		3,00	00	I	By husband ⁽²⁾	
Option (right to buy)	\$9.145								02/2	20/2003	02/2	20/2012	Class A Commo Stock	on 4	4,695		4,69)5	I	By husband ⁽²⁾	
Option (right to buy)	\$10.36								02/2	20/2004	02/2	20/2013	Class A	on 4	4,150		4,15	50	I	By husband ⁽²⁾	

Explanation of Responses:

- $1.\ As\ settlor,\ trustee\ and\ beneficiary\ of\ the\ Imogene\ Powers\ Johnson\ 1993\ Trust\ u/a\ dated\ December\ 13,\ 1993.$
- 2. Mrs. Johnson disclaims beneficial ownership of these shares.
- 3. Class B Common Stock is convertible at any time on a one-share-for-one-share basis into Class A Common Stock.
- 4. The reported shares are held by the Johnson Outdoors Inc. Class B Common Stock Voting Trust.

Remarks:

/s/ Johnson, Imogene P.

03/12/2004

** 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 Number.