FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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						Issuer Name and Ticker or Trading Symbol OHNSON OUTDOORS INC [JOUT]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
(Last) 500 PAR	ast) (First) (Middle) 00 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 03/25/2008										Officer (give title below)				(specify	
(Street) NEW YORK NY 10022 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
			Tabl	e I - Nor	n-Deriv	ative	Se	curit	ies	Acq	uired,	Dis	posed o	f, o	r Ben	efici	ally O	vne	d			
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					and Se Be	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount		(A) or (D)	Price	Transa		ction(s) 3 and 4)			(iiisti. 4)			
Class A Common Stock				03/25	03/25/2008				P		118		A	\$16.01		830,118		D				
			Та										sed of, onvertib					ed				
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date (Month/Day/Year) if any (Month/Day Security		Date, Transaction Code (Ins			on of			6. Date E Expiratio (Month/D	•	Amount of		str. 3	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	(A)			Date Exercisal		Expiration Date	Title	or Nur of	ount mber ares						
1. Name an			Reporting Person* $\frac{R}{R}$																			
(Last) (First) (Middle 500 PARK AVENUE				lle)																		

(Last)	(First)	(Middle)					
500 PARK AVENUE							
-							
(Street)							
NEW YORK	NY	10022					
(City)	(State)	(Zip)					
1. Name and Address	s of Reporting Person* V LLC						
(Last)	(First)	(Middle)					
500 PARK AVENUE							
-							
(Street)							
NEW YORK	NY	10022					
NEW YORK (City)	NY (State)	10022 (Zip)					

Explanation of Responses:

Remarks:

1. In addition to TowerView LLC, this Form 4 is being jointly filed by Daniel R. Tisch, who is General Member of, and has the same business address as, TowerView LLC and may be deemed to have a pecuniary interest in securities owned by it.

> Daniel R. Tisch 03/25/2008 Daniel R. Tisch 03/25/2008 Date

** Signature of Reporting Person

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.