FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

√ashington,	D.C.	20549	

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPF	ROVAL
OMB Number:	3235-0287
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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

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Name and Address of Reporting Person* LEONARD THOMAS C						2. Issuer Name and Ticker or Trading Symbol KADANT INC [KAI]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					_										_	X Direc	tor		10% Ov	vner	
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2023										Office belov	er (give title v)		Other (s below)	specify	
KADAN	4 1	A 15 Amandarant Data of Original Filed (Mansh/DayA/aa-)								6 1	adividual o	loint/Crow	n Eiline	r (Chock An	nlicable						
ONE TECHNOLOGY PARK DRIVE				4. "	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
ONE TECHNOLOGY FARK DRIVE																X Form filed by One Reporting Person					
(Street)					Form filed by More than One Reportin Person																
WESTFORD MA 01886					Pule 10h5-1(c) Transaction Indication																
,					- KI	Rule 10b5-1(c) Transaction Indication															
(City) (State) (Zip)					Ιп	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.															
					$ \sqcup$	satisfy	the aff	firmative	e defens	se cond	lition	s of Rule :	10b5-1	.(c). Se	e Instructi	on 10.					
		Tab	le I - Nor	n-Deriv	/ative	Sec	uritie	es Ac	quire	ed, D	isp	osed o	of, or	r Ben	eficial	ly Owne	d				
1 Title of 9	Security (Ins	tr 3)		2. Trans	action	2/	A. Deer	med	3.			4. Securi	ities A	cauire	d (A) or	5. Amo	unt of	6. Ov	vnership	7. Nature	
Date				Date		ay/Year) Executio if any (Month/D		on Date	, Tra	Transaction Code (Instr.		Disposed Of (D) (Instr. 3,			I Securit Benefit Owned	ties F cially (I Following (Form (D) or	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Co	ode V	,	Amount		(A) or (D)	Price		ed ction(s) and 4)			(Instr. 4)	
Common Stock				09/30	0/2023				1	М		217		A	(1)	1	2,021		D		
		Т	able II - I							,	•	sed of	,		•	Owned					
Derivative Conversion Date Executio Security or Exercise (Month/Day/Year) if any			3A. Deeme	ed Date,	4. Transa	ransaction of Code (Instr. Derivative		6. Date	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	isable	Ex Da	piration ate	Title		Amount or Number of Shares						
Restricted Stock Unit	\$0	09/30/2023			M			217	(1	1)	01	/31/2024	Comi		217	\$0	217		D		

Explanation of Responses:

1. Represents partial vesting of a restricted stock unit award on September 30, 203 and delivery of shares to the reporting person pursuant to the terms of a restricted stock unit award agreement dated May 17, 2023 . The remainder of the shares vest on the last day of the Issuer's fourth quarter of fiscal 2023 provided the reciepient continues to serve as a director of the Issuer.

Remarks:

/s/ Stacy D. Krause, by power of attorney

10/02/2023

** 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.