## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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> PAINTER JONATHAN W					KAI	2. Issuer Name and Ticker or Trading Symbol KADANT INC [KAI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) KADAN	,	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/08/2017								X below	Officer (give title below) PRESIDEN		Other (s below) T AND CEO		
ONE TECHNOLOGY PARK DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WESTFORD MA 01886													X Form Form	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - N	on-Deriv	vative	Securitie	es Aco	quired, I	Disp	osed	of, oı	r Bene	eficia	lly Owne	d				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					2A. Deem Execution if any (Month/Da	n Date,	Transaction Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. and 5)				or 5. Amo Securit Benefic Owned Follow	ties cially	Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v			(A) or (D)	Price	Report Transa		(1130.4)		(1130.4)	
Common Stock														47,072(1)		E	>		
Common Stock												3	I	]	By Son				
		т	able II			ecurities alls, war								y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, T		4. Transac Code (Ir 8)	tion of Deriv Secur Acqu (A) or Dispo of (D)	vative irities uired ir osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) Derivative Security (Ir and 4)				unt of rities erlying /ative rity (Ins	tr. 3	8. Price of Derivative Security (Instr. 5)	of derivative Derivative Securities Security Beneficial		vnership rm: rect (D) Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

\$<mark>0.0</mark>

\$**0.0** 

03/08/2017

03/08/2017

1. Includes 615 shares acquired in an exempt transaction pursuant to the Issuer's Employee Stock Purchase Plan on December 31, 2016.

Code

A

A

V (A)

2. Each Restricted Stock Unit ("RSU") represents the right to receive one share of the issuer's common stock. The RSU vests and is distributable in three equal installations beginning on March 10, 2018, provided that the Issuer meets certain performance requirements for fiscal 2017 and the reporting person is employed by the issuer on the vesting date. The maximum number of shares the reporting person may receive is 150% of the RSU amount.

Date

Exercisable

(3)

(D)

Expiration

04/30/2020

04/30/2020

Title

Commor

Stock

Commor

Stock

Date

3. This RSU vests and becomes exercisable in three annual installments beginning on March 10, 2018, provided the reporting person is employed by the Issuer on the vesting date.

18,976

4,744

Remarks:

Restricted

Stock Unit

Restricted

Stock Unit

<u>by Melodie T. Morin for</u> Jonathan W. Painter

Amount or Number

of Shares

18,976

4,744

\$<mark>0</mark>

\$<mark>0</mark>

03/10/2017

18,976

4,744

D

D

\*\* 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.