### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* PAINTER JONATHAN W						2. Issuer Name and Ticker or Trading Symbol KADANT INC [ KAI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
PAINTER JONATHAN W									-	-				X	Directo	or		10% O	vner		
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Officer (give title below)			Other (specify below)			
KADAN	T INC.				06/	/24/20	)19							CEO							
ONE TECHNOLOGY PARK DRIVE																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)						, , , , , , , , , , , , , , , , , , , ,								Line)					_		
WESTFO	WESTFORD MA 01886													X	, , ,						
					-									Form filed by More than One Reporting Person							
(City) (State) (Zip)																					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,		cution Date, ny		ction nstr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Follo		ies cially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price		Reporte Transa (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 06/24/			06/24/2	019	)19					110	A	\$14.	.17 9		3,427		D				
Common	Common Stock 06/24/201				019	19					110	D	\$91.05	<b>49</b> <sup>(2)</sup>	93	93,317		D			
Common Stock															3		I	By Son			
		Т	able I								posed of				wned			<u> </u>			
(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)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)				6. Date Expirati (Month)	ion Da			of s ng e Security and 4)	Dei Sec (Ins	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amour or Numbe of Shares	er							
Stock Option (Right to	\$14.17	06/24/2019			M <sup>(1)</sup>			110	(3)		03/03/2020	Common Stock	110		\$0	21,810		D			

## **Explanation of Responses:**

- $1. The transactions \ reported \ on this \ Form \ 4 \ were \ executed \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ March \ 19, \ 2019.$
- 2. Represents the weighted average sale price. The actual sales prices range from \$91.05 to \$91.23 per share. The reporting person will supply the SEC, the Issuer, or a security holder of the Issuer, with full information regarding the number of shares at each price upon request.
- 3. This stock option is fully vested.

## Remarks:

/s/ Stacy D. Krause, by power 06/26/2019 of attorney

\*\* 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.