## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL						
OMB Number	3235-028						

37 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).

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

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1. Name and Address of Reporting Person* <u>SINDONI EDWARD J</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol  KADANT INC [ KAI ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) KADAN	T INC.	•	(Middle)			Date o /18/2		est Tran	saction (M	onth/	'Day/Year)		X Officer (give title Other (spe below)  EXECUTIVE VP AND COO									
ONE TECHNOLOGY PARK DRIVE						f Ame	ndmer	nt, Date	Joint/Group	Filing (Ch	eck Ap	plicable										
(Street) WESTFO	rreet) /ESTFORD MA 01886														Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	ate)	(Zip)												1 01301	•						
		Tab	le I - No	n-Deri	vative	e Se	curit	ies Ac	quired,	Dis	posed o	of, or Be	enefici	ially	Owned	l						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		//Year) Execution		a. Deemed ecution Date, any onth/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amou Securition Benefici Owned In	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect irect l)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) o (D)	or Price		Transaction(s) (Instr. 3 and 4)				,			
Common Stock 05/1						7		M		600	A \$		4.5	23	,033	D						
Common	Stock			05/1	8/200	7					600	600 D \$		8.08	22	,433	D					
Common Stock 05/18/				8/200	7			M		500	A	\$1	4.5	22	D	_						
Common Stock 05/18				8/200	7			S		500 D		\$28	8.07 22,433		,433	433 D						
Common Stock 05/1				8/200	7			M		100	A	\$1	\$14.5		,533	D						
Common Stock C				05/1	8/200	7		S		100	D	\$28	\$28.06		2,433							
Common Stock (				05/1	8/200	7		M		400	A	\$1	4.5	22	,833	D	_					
Common Stock			05/1	8/200	7		S		400	D	\$28	\$28.05		,433	D	_						
Common Stock			05/1	8/200	7		M		400	A	\$1	4.5	22,833		D	_						
Common	Stock			05/1	8/200	7			S		400	D	\$28	8.04	22	,433	D					
Common	Stock			05/18/2007							100	A	\$1	4.5	22,533		D					
Common	Stock			05/1	05/18/2007						100	D	\$28	8.01	22,433		D					
Common	Stock			05/1	05/18/2007				M		5,100	_	+	4.5			D					
Common	Stock			05/1	05/18/2007				S		5,100	) D	\$			,433	D					
Common Stock 05/18/				8/200	7			M				\$1	4.5	.5 23,433		D						
		7	able II -								osed of converti				wned							
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. Transactior Code (Instr. 8)		5. Number 6		6. Date Ex Expiration (Month/Da	ercis Date	able and	7. Title ar Amount of Securities Underlyir Derivativ (Instr. 3 a	nd of s ng e Securit	8. De Se (Ir	s. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Own Form Direct or In (I) (In	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amour or Number of Shares	er								
Employee Stock Option (Right To	\$14.5	05/18/2007			M			8,200	01/02/200	3 (	01/02/2009	Common Stock	8,20	0	\$0	25,000		D				

THE TRANSACTIONS REPORTED ON THIS FORM 4 WERE EXECUTED PURSUANT TO A RULE 10b-5-1 TRADING PLAN

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.