FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL							
l	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

								()													
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol KADANT INC [KAI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Powell Jeffrey L</u>						1101		1110	LIGH	. 1				X	Directo	or		10% O	wner		
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)									(give title	title Other below		specify		
KADAN	T INC.	,	,		10	10/31/2019										President & CEO					
ONE TECHNOLOGY PARK DRIVE																					
	_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable										
(Street)						II / Wilding in the Conglitude in the (Wilding Day) Teal)									Line)						
WESTFORD MA 01886															X Form filed by One Reporting Person						
					-										Form filed by More than One Reporting Person						
(City) (State) (Zip)																					
		Tab	le I - I	Non-Deri	vativ	e Sec	urit	ies Ad	quire	d, D	isposed o	f, or B	eneficia	lly (Owned						
1. Title of Security (Instr. 3) 2. Transaction						2A. Deemed						Acquired (A) or							7. Nature		
Date (Month/Day/					y/Year)	Execution Date, 'ear) if any			Transa Code (I		Disposed Of	isposed Of (D) (Instr. 3, 4 and			Securiti Benefici			orm: Direct D) or Indirect	of Indirect Beneficial		
						(Month/Day/Year)		8)					Owne Repo		Following d	(I) (Instr. 4)		Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Transac (Instr. 3	tion(s)			(
Common Stock 10/31/201							.9				11,347	Α	\$14.1	7	23	,601		D			
Common Stock 10/31/201						19			S ⁽¹⁾		6,035	D	\$90.107	1073(2)		,566		D			
			Table	II - Deriv	ative	Secu	ritie	es Acc	uired	, Dis	posed of,	or Ber	neficially	/ O\	vned						
				(e.g.,	puts,	calls	, wa	arrant	s, opt	ions	, convertil	ble sec	urities)								
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 Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares								
Stock Option (Right to	\$14.17	10/31/2019			M ⁽¹⁾			11,347	(3	3)	03/03/2020	Commor Stock	11,347		\$0	0		D			

Explanation of Responses:

- $1. \ The \ transactions \ reported \ on \ this \ Form \ 4 \ were \ executed \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ September \ 10, \ 2019.$
- 2. Represents the weighted average sale price. The actual sales prices range from \$90 to \$90.38 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 of attorney

11/01/2019

** 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.