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ALBERTINE	JOHN M											
Form 4												
March 11, 200										PPROVAL		
FORM		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287				
Check this if no longer	-								Expires:	January 31,		
subject to Section 16.	SIAII	EMENT O		GES IN E SECURI		CIAI	LOW	NERSHIP OF	Estimated average burden hours per			
Form 4 or Form 5	T '1 1		0 . 14		a	-	1		response	•		
obligations may contin <i>See</i> Instruc 1(b).	ue. Section 1	7(a) of the		lity Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	'n			
(Print or Type Re	sponses)											
1. Name and Address of Reporting Person <u>*</u> ALBERTINE JOHN M			2. Issuer Name and Ticker or Trading Symbol KADANT INC [KAI]				g	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)		Earliest Tra	(Check all applicable)			e)				
KADANT INC., ONE TECHNOLOGY PARK DRIVE			(Month/Day/Year) 03/04/2009					_X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) WESTFORD, MA 01886			4. If Amen	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mont	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	7 11		• • • •				e			
							ties Ac	quired, Disposed o		-		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executi any	emed on Date, if /Day/Year)	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) o of (D 4 and (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock								24,500	D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 2 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative Expiration Date **Underlying Securities** Security (Month/Day/Year) (Instr. 3 and 4) or Exercise any Code Securities Acquired (A) (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Derivative or Disposed of Security (D) (Instr. 3, 4, and 5) Amount Date Expiration or Title Exercisable Date Number Code V (A) (D) of Shares Restricted 15,000 Common (1) 04/03/2010 \$0 03/04/2009 A 15,000 (1)Stock Unit Stock

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ALBERTINE JOHN M KADANT INC. ONE TECHNOLOGY PARK DRIVE WESTFORD, MA 01886	Х					
Signatures						
by Sandra L. Lambert for John M. Albertine	03/11/2009					
**Signature of Reporting Person		Date				

Explanation of Responses:

* 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).

Each Restricted Stock Unit ("RSU") represents the right to receive one share of the issuer's common stock. The RSU vests in four installments of 1,250 shares each on the last day of each of the issuer's first, second, third and fourth quarters of fiscal 2009. The balance

(1) Instantients of 1,250 shares each of the last day of each of the issuer s first, second, third and fourth quarters of fiscal 2009. The balance of 10,000 RSUs vest only upon a change in control of the issuer that occurs during the period beginning on the first day of the issuer's second quarter of fiscal 2009 and ending on the last day of the issuer's first quarter of fiscal 2010.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.