## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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*  SAUNDERS ROBERT H JR						2. Issuer Name <b>and</b> Ticker or Trading Symbol KAMAN CORP [ KAMN ]									5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% Ov V Officer (give title Other (s				wner
(Last) (First) (Middle) 837 NEIPSIC ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/09/2006									below)			below)	·
(Street) GLASTONBURY CT 060332566					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting				
(City) (State) (Zip)					Person Person													ung	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						5. Amount of Securities Beneficially Owned Following Reported		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount	(A) or (D) Pri		rice	Transaction(s) (Instr. 3 and 4)				(111511. 4)		
Kaman Common Stock 02/09/2						2006			<b>J</b> (1)	V	0.56	]	) (	20.46	44,4	.99(2)		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (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)	n Date, Transa Code (I ay/Year)				vative rities rired r osed )	6. Date Exercis Expiration Dat (Month/Day/Ye		e of Securiti		urities ying tive Sed	urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	mber ares					
Stock Appreciation Rights (SAR)	\$9.9								(3)		(3)	Kama Comm Stock	on 22	,980		22,98	0	D	
Stock Appreciation Rights (SAR)	\$14.5								(3)		(3)	Kama Comm Stock	on 6	,000		6,000	)	D	
Stock Appreciation Rights (SAR)	\$16.3125								(3)		(3)	Kama Comm Stock	on 3	,000		3,000	)	D	
Stock Options (Right to buy)	\$14.5								(3)		(3)	Kama Comm Stock	on 2	,400		2,400	)	D	
Stock Options (Right to	\$16.3125								(3)		(3)	Kama Comm	n on 1	,600		1,600		D	

buy)

- 1. Automatic cash out of a fractional share under the Corporation's Employees Stock Purchase Plan, a 16(b)-3 qualified plan.
- $2. \ Includes \ acquisition \ of \ 35.07 \ shares \ under the \ Corporation's \ Employees \ Stock \ Purchase \ Plan, \ a \ 16(b)-3 \ qualified \ plan$
- 3. Exercisable at the rate of 20% per year, beginning one year after grant date; expires ten (10) years after grant. All options and stock appreciation rights are issued under the Corporation's 16b-3 qualified Stock Incentive Plan, including options issued under predecessor plan. The Plans include a feature which permits the exercise price for an option to be paid by withholding a portion of the shares otherwise issuable upon exercise.

Robert H Saunders, Jr.

Stock

02/13/2006

\*\* 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.