## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

| Washington, D.C | 3. 20549 |
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| <b>STATEMENT</b> | OF CHANGES IN BENEFICIAL OWNER | SHIP |
|------------------|--------------------------------|------|

| l | OMB APPRO              | VAL       |  |  |  |  |
|---|------------------------|-----------|--|--|--|--|
| l | OMB Number:            | 3235-0287 |  |  |  |  |
| l | Estimated average burd | en        |  |  |  |  |
| 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* $\underline{Hanna\ Steven\ R}$ |   |  |  |         |                                       | 2. Issuer Name and Ticker or Trading Symbol KENNAMETAL INC [ kmt ] |   |        |   |                          |     |   |   |   |  | ck all appli<br>Directo                            | or   |                  | 10% Ow   | ner  |
|---|---|--|--|---------|---------------------------------------|--|---|--------|---|--------------------------|-----|---|---|---|--|--|--|------------------|--|--|
| (Last)<br>1600 TE   | (Fi   |  | (Middle)                                     |         |                                       | 3. Date of Earliest Transaction (Month/Day/Year) 02/14/2012        |   |        |   |                          |     |   |   |   | X Officer (give title below)  Vice Presi |  |  |                  | Other (specify below)  |  |
| (Street) LATROBE PA 15650  (City) (State) (Zip)                         |   |  |  |         |                                       |  |   |        |   |                          |     | (Month/Da   | Line)   | Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |  |                  |  |  |
|   |   | Tab  | le I - No                                    | n-Deriv | vative                                | e Se   | curit   | ies Ad | quire   | ed, D                    | isp | osed c  | of, or Be   | nefic   | cially                                   | Owned  | l  |                  |  |  |
| Dat   |   |  |  | Date    | Transaction<br>ate<br>Month/Day/Year) |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |        | ′   co  | Transaction Code (Instr. |     | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 5) |   |   | 4 and Securiti<br>Benefici<br>Owned      |  | es Formially (D) (Following (I) (I   |                  | n: Direct or<br>r Indirect E<br>estr. 4)                                 | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |
|   |   |  |  |         |                                       |  |   |        | Co  | de V                     | ,   | Amount  | t (A) or (D)  |   | ce                                       | Reported<br>Transaction(s)<br>(Instr. 3 and 4)     |  |                  |  | (Instr. 4)   |
| Common  | Stock   |  |  | 02/1    | 4/2012                                | 2  |   |        |   | 1                        |     | 3,700   | ) A   | \$2   | 21.06 6,5                                |  | 569.9389   |                  | D  |  |
| Common Stock 02   |   |  |  |         | 4/2012                                | 2  |   |        |   | 5                        |     | 3,700   | D \$4   |   | 45.5                                     | .5 2,869.9389                                      |  | D <sup>(1)</sup> |  |  |
|   |   | T  | able II -                                    |         |                                       |  |   |        |   |                          |     |   | , or Ben<br>ble secu  |   |  | Owned  |  |                  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                     | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Execution<br>if any<br>(Month/Da | Date,   | 4.<br>Transa<br>Code (<br>8)          |  |   |        | 6. Date Exercisa<br>Expiration Date<br>(Month/Day/Yea |                          |     |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4) |   | [<br>  5<br>  (                          | p. Price of<br>Derivative<br>Security<br>Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у                | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |  |  |         | Code                                  | v  | (A)   | (D)    | Date<br>Exerc   |                          |     | piration<br>ite   | Title   | Amo<br>or<br>Num<br>of<br>Shar  | ber                                      |  |  |                  |  |  |
| Stock<br>Option<br>(right to  | \$21.06   | 02/14/2012                                 |  |         | М                                     |  |   | 3,700  | (2  | 2)                       | 11/ | /01/2018  | Common<br>Stock   | 3,7   | 00                                       | \$0  | 3,900  |                  | D  |  |

## **Explanation of Responses:**

- 1. Includes 616.9389 shares held in the Kennametal Inc. 401K Plan.
- 2. Option is exercisable in four equal annual installments, commencing on the first anniversary of the grant date.

By: Kevin G. Nowe For: Steven R. Hanna 02/15/2012

\*\* 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.