FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL
	OMB Number:	3235-0287
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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*  KITS VAN HEYNINGEN MARTIN						2. Issuer Name <b>and</b> Ticker or Trading Symbol KVH INDUSTRIES INC \DE\ [ KVHI ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
	ast) (First) (Middle) VH INDUSTRIES, INC. ) ENTERPRISE CENTER						3. Date of Earliest Transaction (Month/Day/Year) 03/30/2017											(give title CEO/Cha	Other (s below) airman BOD		pecify		
(Street) MIDDLETOWN RI 02842					_ 4. _	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 Person						
(City)	(5	State)	(Zip)				•.•				_				<u> </u>								
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D					nsactio	on	2A. Deem Execution if any	A. Deemed Execution Date,		3. Transaction Code (Instr.			4. Securities Acquired (A)				or 5. Amoun Securities Beneficia Owned Fo		Form	Direct Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	e v	,	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		on(s) nd 4)			(Instr. 4)		
Common Stock 03/30/						/2017			J <sup>(1</sup>			37,09	9	A	\$0	642,227		D					
Common Stock																10,201		201			By Spouse		
			Table II - I				urities ls, warr				•				-	Owne	d						
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/Ye	ate,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		es Security	Deriva Secur	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able		piration ite	Title		Amount or Number of Shares			Transaction(s					
Employee Stock Options- Right to Buy	\$8.05	03/30/2017			J <sup>(2)</sup>		117,843		04/24/	2018	03.	/30/2017	Com Sto		117,843	\$8.0	05	45,000	<sub>j</sub> (3)	D			
Employee Stock Options- Right to	(5)								(5)			(5)	Com: Sto		(5)			1,232 <sup>(</sup>	(4)	I	By Spouse		

## **Explanation of Responses:**

- 1. Restricted stock grant issued pursuant to the terms & conditions of KVH Industries' 2016 Equity & Incentive Plan. Restricted stock will vest in four installments on each of 4/3/2018, 3/26/2019, 4/3/2020, and 3/26/2021, provided the executive is employed by the Company at the time of vesting.
- 2. Non-qualified stock option grant issued pursuant to the terms & conditions of KVH Industries' 2016 Equity & Incentive Plan. Grant will vest in four installments on each of 4/24/2018, 3/4/2019, 4/25/2020, and 3/4/2021, provided the executive is employed by the Company at the time of vesting.
- 3. Represents total vested/unexercised options "beneficially owned".
- 4. Represents total vested/unexercised options "beneficially owned" by spouse.
- 5. Not applicable.

## Remarks:

Martin Kits van Heyningen

04/03/2017 \*\* 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.