## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL											
OMB Number:	3235-0362										
Estimated average burden											
hours per response:	1.0										

Form 3	Holdings Rep	orted.												nou	ırs per re	sponse:		1.0	
Form 4	Transactions	Reported.	File	ed pursuant to or Section					ırities Excha Company Ad										
Name and Address of Reporting Person*     Reilly Donald W.					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)  Director 10% Owner  Officer (give title Other (specify						,	
(Last) (First) (Middle) KVH INDUSTRIES, INC. 50 ENTERPRISE CENTER					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020								below)  CFO_Retired						
(Street) MIDDLE	ETOWN R		02842 Zip)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - Non-Deriv	ative Sec	uriti	es A	cquire	d, D	isposed	of, or	Benefici	ially	Owned	t					
		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			or Dispose	5. Amour Securitie Beneficia Owned a		s Own		nership Ind m: Direct Be		Nature of lirect neficial nership			
				(,						(A) or (D)	Price		Issuer's F Year (Insti 4)	scal Indire			(Instr. 4)	) .	
Common Stock											54,261		D						
		Т	able II - Deriva (e.g., p	tive Secu outs, calls									Owned						
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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disport of (D	osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		L. Nature f Indirect eneficial wnership nstr. 4)		
					(A)	(D)	Exercisa	able	Date	Title	Shares	+					_		
Employee Stock Options-	(1)						(1)		(1)	Commo				25,5	528	D			

**Explanation of Responses:** 

1. Not applicable.

## Remarks:

Donald W. Reilly

01/26/2021

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).