FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*  Tavares Robert	2. Date of E Requiring S (Month/Day 04/08/202	tatement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol  KVH INDUSTRIES INC \DE\ [ KVHI ]					
(Last) (First) (Middle) 50 ENTERPRISE CENTER	04/00/2020		1		) Wner	If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)		
(Street)  MIDDLETOWN RI 02842  (City) (State) (Zip)			Officer (give title below)	Other below)	(Specify	X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )	Form: I (D) or I			ture of Indirect Beneficial ership (Instr. 5)	
Common Stock			10,000(1)	I	)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)  2. Date Exer Expiration D (Month/Day/		ate	3. Title and Amount of S Underlying Derivative So (Instr. 4)		4. Conversion	se Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

## **Explanation of Responses:**

1. Restricted stock grant (for newly elected board member) issued pursuant to the terms & conditions of KVH Industries' 2016 Equity & Incentive Plan. Restricted stock will vest in four installments on each of 7/8/20, 10/8/20, 1/8/21, 4/8/21, provided Mr. Tavares is still a board member of KVH Industries, Inc.

Robert Tavares

04/16/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.