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

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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* BRUUN BRENT C						2. Issuer Name and Ticker or Trading Symbol KVH INDUSTRIES INC \DE\ [KVHI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
						Date of Earliest Transaction (Month/Day/Year)									(give title		Other (s below)	· I	
(Last) (First) (Middle) KVH INDUSTRIES, INC.						12/13/2016								COO					
50 ENTERPRISE CENTER						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) X Form filed by One Reporting Person					
MIDDLETOWN RI 02842					_									Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans Date (Month/						if any	emed tion Date n/Day/Yea	Code	Transaction Code (Instr.		es Acquired Of (D) (Instr		Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock					12/13/2016						25,650) A	\$9.32	125	125,482		D		
Common Stock				12/1	12/13/2016				S		24,052	. D	\$11.9	101	101,430		D		
Common Stock 1.				12/1	2/13/2016				S		300	D	\$11.92	5 101	101,130		D		
Common Stock 12				12/1	/13/2016				S		1,298	D	\$11.9	5 99,	99,832		D		
Common Stock 12/14					4/201	6			J ⁽¹⁾		600	A	\$9.32	100	100,432		D		
Common Stock 12/14				4/201	1/2016					600	D	\$11.71	9 99,	99,832		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)	3A. Deeme Execution if any (Month/Da	d Date,	4. Transa	I. Fransaction Code (Instr.		umber ivative urities uired or posed D) (Instr. and 5)	6. Date E Expiratio	5. Date Exercisa Expiration Date Month/Day/Year		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Oir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
													Amount or Number						
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	of Shares						
Employee Stock Options- Right to Buy	\$9.32	12/13/2016			J ⁽²⁾			25,650	02/28/201	l6 ⁽³⁾	02/28/2017	Common Stock	25,650	\$9.32	600 ⁽⁴⁾		D		
Employee Stock Options- Right to Buy	\$9.32	12/14/2016			J ⁽²⁾			600	02/28/201	6(3)	02/28/2017	Common Stock	600	\$9.32	0 ⁽⁴⁾		D		

Explanation of Responses:

- 1. Shares acquired via the exercise of stock options issued pursuant to the terms and conditions of the company's 2006 Stock Incentive Plan.
- 2. Exercise of expiring stock options issued pursuant to the terms and conditions of the company's 2006 Stock Incentive Plan.
- 3. Date option became fully vested.
- 4. Represents total vested/unexercised options "beneficially owned".

Remarks:

Brent C. Bruun

12/15/2016

** Signature of Reporting Person

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.