Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB API	OMB APPROVAL									
OMB Number:	3235-0287									
Estimated average	hurden									

0.5

hours per response:

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*  Balog Robert J  (Last) (First) (Middle)  KVH INDUSTRIES, INC.  50 ENTERPRISE CENTER					- <u>K</u>	2. Issuer Name and Ticker or Trading Symbol  KVH INDUSTRIES INC \DE\ [ KVHI ]  3. Date of Earliest Transaction (Month/Day/Year)  06/05/2019									ationship of Reporting Pers k all applicable) Director Officer (give title below) Chief Technology			10% Ow Other (s below)	ner
					_ 4.1	If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check Applicable				olicable
(Street) MIDDLETOWN RI 02842														ne) X					
(City)	(S	tate)	(Zip)												1 013011				
		Tab	le I - Non	ı-Deri	vativ	e Se	curities	s Ac	quired,	Disp	osed o	f, or Be	neficia	lly (	Owned				
Date			Date	h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		ed (A) or str. 3, 4 ai	nd	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) o (D)	Price	- 1	Transact (Instr. 3 a	tion(s)			(113411 4)
Common Stock 06/05.				)5/201	/2019			J <sup>(1)</sup>		12,94	5 A		)	93,300			D		
		-	Table II - I (	Deriva (e.g., ¡	ative puts,	Sec call	urities <i>i</i> s, warra	Acqı ants	uired, D , option	ispo s, c	sed of, onverti	or Ben ble secu	eficiall ırities)	уΟι	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	Code (In		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es d	Expiration	. Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		xpiration vate	Title	Amoun or Numbe of Shares						
Employee Stock Options- Right to	\$9.33	06/05/2019			J <sup>(2)</sup>		39,735		06/05/2020	0 0	6/05/2024	Common Stock	39,73	5	\$9.33	17,528	(3)	D	

## **Explanation of Responses:**

- 1. Restricted stock grant issued pursuant to the terms & conditions of KVH Industries' 2016 Equity & Incentive Plan. Restricted stock will vest annually in four equal installments, the first of which will vest on 6/5/2020, 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 vests annually in four installments, the first of which will vest on 6/5/2020, provided the executive is employed by the Company at the time of vesting.
- 3. Total vested/unexercised options beneficially owned.

## Remarks:

Robert J. Balog

06/07/2019

\*\* 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.