Instruction 1(b).

## FORM 5

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,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

# ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNEDCHID

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								

Form 3	Holdings Rep		OWNERSHIP										hours per response:		1.0			
Form 4	Transactions	Reported.	F	Filed pursuant t or Sectio			(a) of the e Investn					1934						
1. Name and Address of Reporting Person*  DODEZ JAMES S					2. Issuer Name <b>and</b> Ticker or Trading Symbol  KVH INDUSTRIES INC \DE\ [ KVHI ]						5 (0	Check all	applica irector	,	10% O	wner		
(Last) (First) (Middle)  KVH INDUSTRIES, INC.  50 ENTERPRISE CENTER					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2012						ar)	- X Officer (give title Other (specify below)  VP Mktg & Strategic Planning						
(Street) MIDDLETOWN RI 02842-5279				4. If Amer	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)	(0)		(Zip)	ivative Sec	· · · · · ·	ioc A	cauire	d Die	nosad	of (	or Ro	nefici	ally Ov	uned				
1. Title of Security (Instr. 3)		2. Transaction Date	2A. Deemed Execution Date,		3. Transactio Code (Inst						posed			6. Ownership Form: Dire (D) or	Benefici	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				(monanday) re	,	-,	Am	ount	(A)	or			Issuer's F Year (Inst 4)	iscal	Indirect (I)			
Common Stock												58,471		D	D			
Common Stock												2,5	29	I	By Spouse	By Spouse/Children		
		-	Table II - Deriv (e.g.,	ative Secu puts, calls										ed				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	ate Execution Date,	Transaction Code (Instr. 8)	of Deri Secu Acqu (A) o Disp of (D	of Ex		Date Exercisable and cpiration Date lonth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		J Security	8. Price Derivar Securit (Instr. !	ive d y S i) B O F R	Number of erivative scurities eneficially whed billowing eported ansaction(s) estr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						(A)	(D)	Date Exercisa		piration te	Title	e	Amount or Number of Shares					
Employee Stock Options	(1)						(1)		(1)		nmon tock	(1)			3,750 <sup>(2)</sup>	D		

#### **Explanation of Responses:**

- 1. Not applicable.
- 2. Represents total vested/unexercised stock options at year-end.

## Remarks:

James S. Dodez 02/06/2013

\*\* 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.