FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasiliigion,	D.O.	20070

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

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*						2. Issuer Name and Ticker or Trading Symbol KVH INDUSTRIES INC \DE\ [KVHI] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)														
FEINGOLD FELISE						[Transportation in the last [RVIII]									Directo	or		10% Ov	vner	
						3. Date of Earliest Transaction (Month/Day/Year)								X	Officer below	Officer (give title		Other (s	specify	
(Last)	,		(Middle)		03/	03/11/2024									,	SVP Gene	eral C	, ,		
50 ENTE	ERPRISE C	ENTER			1 If	· Λmor	ndmani	- Data	of Origin	al File	d (Month/F)av/Vear)	-	Indi	vidual or	loint/Group	Filin	a (Check Ar	nlicable	
(Otro1)					- - "	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applica Line)								plicable						
(Street)	ETOWN RI		02842											X		filed by One Reporting Person				
					.									Form filed by More than One Reporting Person						
(City)	(Si	rate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication														
					I_{\Box}	Check	this bo	ox to in	dicate that	a tran	saction was	made purs	uant to a c	ontra	ct. instruct	ion or writter	n plan t	that is intende	ed to	
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																				
		Tabl	e I - Non	-Deriv	ative	Sec	uritie	es Ac	quirec	l, Dis	sposed	of, or B	enefici	ally	Owne	d				
1. Title of S	Security (Inst	r. 3)		2. Trans	action				3.		4. Secur	ities Acqu	ired (A) o	5. Amount of				7. Nature		
Date (Month/D				Day/Yea				Code	Code (Instr. 5		Disposed Of (D) (Instr. 3, 4			Securiti Benefici	ally (D	(D) o	or Indirect	of Indirect Beneficial		
						(1		(Month/Day/Year		ır) 8)				Owned I Reporte		d			Ownership (Instr. 4)	
								Code	v	Amount	ount (A) or (D)		•	Transaction(s) (Instr. 3 and 4)						
Common Stock 03/11/				1/2024				S ⁽¹⁾ 1,590 D		\$4	.65	83,515			D					
		T	able II - [Deriva	tive S	Secu	rities	Acc	uired,	Disp	osed of	, or Be	neficia	lly C	wned					
			(e.g., p	uts, e	calls	, war	rants	s, optic	ns,	convert	ible sec	urities)						
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any	Date,	4. Transa	otion	of Derivative		6. Date Exercise			Amount of		8. Price of Derivative		9. Number of derivative		10. Ownership	11. Nature of Indirect	
Security	or Exercise				Code (th/Day/Year)						Securities		Form:	Beneficial	
(Instr. 3)	Price of Derivative		(Month/Day/Year) 8) Securities Underlying Acquired Derivative S										nstr. 5)			Direct (D) or Indirect	Ownership (Instr. 4)			
	Security					(A) or (Instr. 3 and 4)										Following ((I) (Instr. 4)	(111541.4)	
				Disposed of (D)												Reported Transaction(s)				
						(Instr. 3, 4 and 5)										(Instr. 4)				
													Amour	t						
													or Numbe	r						
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Shares							
Employee																				
Stock Options-	(2)								(2)		(2)	Common Stock	0(2)			86,330		D		
Right to Buy												Stock								

Explanation of Responses:

- $1. \ Shares \ sold \ to \ pay \ the \ taxes \ owed \ on \ a \ restricted \ stock \ award \ that \ partially \ vested \ on \ March \ 7, 2024.$
- 2. Not applicable.

Felise Feingold

03/13/2024

** 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.