FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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washington, D.C. 20549	

OMB APF	PROVAL
OMB Number:	3235-0362
Estimated average	burden

- 1	Section 10. Form 4 or Form 5	
_	obligations may continue. See	
	Instruction 1(b).	

Check this box if no longer subject to

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

_	ction 1(b). 3 Holdings Rep	orted.	OWNERSHIP											response:	urden	1.0	
Form 4	4 Transactions	Reported.	File	ed pursuant t or Sectio					urities Excha Company Ad								
1. Name and Address of Reporting Person* FEINGOLD FELISE				2. Issuer Name and Ticker or Trading Symbol KVH INDUSTRIES INC \DE\ [KVHI]							04		e)	10%	to Issuer % Owner ther (specify		
	(Fi DUSTRIES ERPRISE C	, INC.	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2018						Year)		ow) `	P General Counsel			,
(Street)	ETOWN R	I	02842	4. If Amer	ndmen	nt, Dat	e of Origir	nal Fi	led (Month/I	Day/Year		Fo	rm filed b	y One Re	ing (Check eporting Pe nan One R	erson	лlе
(City)	(Si	ate)	(Zip)														
		Tab	le I - Non-Deriv	ative Sec	curiti	es A	cquire	d, D	isposed	of, or l	Benefici	ally Ow	ned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	5. Amount Securities Beneficially Owned at e		Forn	nership n: Direct	7. Nature Indirect Beneficia Ownershi	al	
			(WORTH/DAY	n reary	6,		Amount		(A) or (D)	Price	Issue	's Fiscal Instr. 3 ar	Ìndir	rect (I)	(Instr. 4)		
Common Stock											44,214			D			
		T	able II - Deriva (e.g., p	tive Secu uts, calls									d				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction of Deriv Secul (A) or Disport of (D) (Instrand 5		rities ired osed		ite	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price (Derivativ Security (Instr. 5)	deriv Secu Bene Owne Follo Repo	rities ficially ed wing orted saction(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	nip of Inc Bene Owne ct (Instr	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares	1					
Employee Stock Options-	(1)						(1)		(1)	Commo Stock	n (1)		8,	,057 ⁽²⁾	D		

Explanation of Responses:

- 1. Not applicable.
- ${\it 2. Represents\ total\ vested\ stock\ options\ "beneficially\ owned"}.$

Remarks:

Right to Buy

Felise Feingold

02/04/2019

** 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.