FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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		W	as	hir	ngto	on,	D	.C.	20)54	19	,

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average I	burden								

Section obligat Instruc	n 16. Form 4 or ions may contirtion 1(b). Holdings Repo	Form 5 nue. See	L STAT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OWNERSHIP OMB Number: 3235-Estimated average burden hours per response:								3235-0362 den 1.0					
Form 4	Transactions I	Reported.	Fil	ed pursuant to or Section					ırities Excha Company Ad		f 1934						
1. Name and Address of Reporting Person* RENDALL PETER					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 Officer (give title Other (specify					
	(Fi DUSTRIES ERPRISE C	, INC.	Middle)		Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 2/31/2014							below	ı) ``	f Financial Officer			
(Street) MIDDLI (City)	ETOWN RI		02842 Zip)	4. If Amer	ndmen	it, Date	e of Origin	al Fil	led (Month/[Day/Year)		6. Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	e I - Non-Deri	vative Sec	uriti	es A	cquired	l, Di	isposed	of, or B	eneficia	Ily Owne	d				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)		r Disposed	5. Amour Securitie Beneficia Owned a	es ally t end of	(D) or	ership I : Direct E	7. Nature of Indirect Beneficial Ownership		
							Amou	unt	(A) or (D)	Price	Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)		
Common Stock												23,	200		D		
		Ta	able II - Deriva (e.g., p	tive Secu outs, calls								y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, Transaction		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reported Transact (Instr. 4)	/e es ally ng d tion(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
					(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Employee Stock	(1)						(1)		(1)	Common	(1)		25.00	n(2)	D		

Explanation of Responses:

1. Not applicable.

Options

2. Represents total vested/unexercised options "beneficially owned" at year-end.

Remarks:

Peter Rendall

02/17/2015

** 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.