FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden

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* <u>KITS VAN HEYNINGEN ARENT</u>							2. Issuer Name <b>and</b> 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 V Other (specify				
(Last) (First) (Middle)  KVH INDUSTRIES, INC.  50 ENTERPRISE CENTER						3. Date of Earliest Transaction (Month/Day/Year) 08/08/2008										below)  Chairman Emeritus					
(Street) MIDDLETOWN RI 02842 (City) (State) (Zip)					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					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)	2A. Deer Execution if any (Month/I	_   C₀	Transaction Code (Instr.						nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
											v	Amount	t	(A) or (D)	Price		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock										$\neg$						29	294,933		D		
Common Stock 08/08/						3			A	(1)		268		A	\$0	24	246,287		I	By Spouse	
Common Stock 08/11/2						3				(2)		31		D	\$8.6	246,256			I	By Spouse	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Year			Amo Sec Und Deri		ritle and lount of surities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable		piration ite	Title	1	Amount or Number of Shares						
Employee Stock Options- Right to Buy	(3)								(3)	)		(3)	Com Sto		(3)		31,250 <sup>(</sup>	4)	D		
Employee Stock Options-	(3)								(3)	)		(3)	Com		(3)		1,425 <sup>(5</sup>	5)	I	By Spouse	

## **Explanation of Responses:**

- 1. A restricted stock award granted to spouse/KVH employee issued pursuant to the terms & conditions of KVH Industries' 2006 Stock Incentive Plan. This award vests in 4 installations (67 on 8/8/09; 67 on 8/8/10; 67 on 8/8/11; 67 on 8/8/12).
- $2. \ Shares \ sold \ to \ pay \ the \ taxes \ owed \ on \ a \ restricted \ stock \ award \ that \ partially \ vested \ on \ 8/10/2008.$
- 3. Not applicable.
- 4. Represents total vested/unexercised options "beneficially owned".
- $5. \ Represents \ total \ vested/unexercised \ options \ "beneficially owned" \ by \ spouse.$

## Remarks:

Arent Kits van Heyningen

08/12/2008

\*\* 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.