#### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

### ANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     AIN MARK						2. Issuer Name <b>and</b> Ticker or Trading Symbol  KVH INDUSTRIES INC \DE\ [ KVHI ]											ationship of Reportin call applicable) Director		10% Owi		wner
(Last) KVH IN 50 ENTH	08/	3. Date of Earliest Transaction (Month/Day/Year) 08/05/2010												r (give title )		Other ( below)					
	- 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)												6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) MIDDLETOWN RI 02842																1	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S	tate)	(Zip)																		
		Tab	le I - Nor	ı-Deriv	ative	Se	curiti	es A	cqui	ired, [	Disp	osed	of, or	Ben	eficia	lly O	vne	d			
1. Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Dispos Code (Instr. 5)				i (A) or . 3, 4 an	4 and Securit Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Ī	Code	v	Amoun		A) or D)	Price	Reporte Transa (Instr. 3		ction(s)			(Instr. 4)
Common	Stock			08/05	5/201	/2010				A <sup>(1)</sup>		5,00	5,000 A		\$0	58,246		3,246	D		
Common Stock 08/0				08/05	5/201	/2010				<b>A</b> <sup>(2)</sup>		5,000 A		\$0	63,246			D			
		Т	able II - I (									sed of				/ Owi	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		Transaction Code (Instr.		umber vative urities uired or osed o) r. 3, 4 5)	Expi	6. Date Exercisable a Expiration Date Month/Day/Year)			nnd 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			Deriva Secur	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		piration te	Title	OI No Of	umber						
Director Stock Options- Right to	(3)									(3)		(3)	Comm Stocl		(3)			35,000 <sup>(4</sup>	4)	D	

## **Explanation of Responses:**

- 1. Annual restricted stock grant (for continuing service on KVH Industries' Board of Directors). Grant issued pursuant to the terms & conditions of KVH Industries' 2006 Stock Plan. Grant vests in 4 quarterly installments (1250 on 11/5/10; 1250 on 2/5/11; 1250 on 5/5/11; 1250 on 8/5/11).
- 2. Annual restricted stock grant (for continuing service on KVH Industries' Audit Committee). Grant issued pursuant to the terms & conditions of KVH Industries' 2006 Stock Plan. Grant vests in 4 quarterly installments (1250 on 11/5/10; 1250 on 2/5/11; 1250 on 5/5/11; 1250 on 8/5/11).
- 3. Not applicable
- 4. Represents total vested/unexercised options "beneficially owned".

# Remarks:

/s/ Mark S. Ain 08/06/2010

\*\* 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.