FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

OWNERSHIP

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ABBULAL CTATERIEST	OF OUR MORE IN DENERIOUS
ANNUAL STATEMENT	OF CHANGES IN BENEFICIAL

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

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3	Holdings Rep	orted.												lliou	irs per i	esponse.	1.0
Form 4	Transactions	Reported.	Fil	ed pursuant t or Sectio					rities Excha Company Ad								
1. Name and Address of Reporting Person* KITS VAN HEYNINGEN ARENT				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 (sine title) Other (specify)						
(Last) (First) (Middle) KVH INDUSTRIES, INC. 50 ENTERPRISE CENTER			12/31/20	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009							X Officer (give title Other (specify below) Chairman Emeritus						
(Street) MIDDLI (City)	ETOWN R	_ 4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)							_ine)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	e I - Non-Deriv	ative Sec	curiti	es A	cquired	l, Di	isposed	of, or I	Benefici	ially	/ Owne	d			
			Execution I	Execution Date, Tif any C		3. Transaction Code (Instr. 8) 4. Securities Acq			or Dispose	5. Amou Securitie Beneficia Owned a		es Own ally Forn		ership : Direct	7. Nature of Indirect Beneficial Ownership		
			(Monunbay/Tear)		0)		Amount		(A) or (D)	Price		Issuer's	ssuer's Fiscal Ind ear (Instr. 3 and (Ins		ect (I) . 4)	(Instr. 4)	
Common Stock												294,933		D			
Common Stock											245,788			I	By Spouse		
		Ta	able II - Deriva (e.g., p	tive Secu outs, calls									Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv	vative rities nired r osed)	6. Date E: Expiration (Month/D			of es ing ve Security and 4)					10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficia Ownershi ct (Instr. 4)	
					(A)	(D)	Date Exercisal		Expiration Date	Title	Amoun or Number of Shares						
Employee Stock	(1)						(1)		(1)	Commo	n (1)			28,125	(2)	D	

Explanation of Responses:

- 1. Not applicable.
- 2. Represents total vested/unexercised options at year-end

Remarks:

Options

A.H. Kits van Heyningen

01/22/2010

** 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.