Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington,  | D.C. | 20549 |
|--------------|------|-------|
| vvasimigton, | D.C. | 20070 |

|  | CTATEMENT OF CHANCES IN DENETICIAL | OWNIEDCLIID |
|--|------------------------------------|-------------|
| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP   |
| Section 16. Form 4 or Form 5           |                                    |             |
| obligations may continue. See          |                                    |             |

|   | OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
|   | OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |
|   | Estimated average burden |           |  |  |  |  |  |  |  |  |  |
| - | hours nor resnance:      | 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

| 1. Name and Address of Reporting Person*  HONEY STANLEY K           |   |  |  |                        |   |   |       |                                 |                  |  |   |                     |  |                |  | eck all applic  | able)<br>r  | g Pers  | on(s) to Issi  | ner  |
|---|---|--|--|------------------------|---|---|-------|---------------------------------|------------------|--|---|---------------------|--|----------------|--|---|---|---|--|--|
| (Last) (First) (Middle)  KVH INDUSTRIES, INC.  50 ENTERPRISE CENTER |   |  |  |                        |   | 3. Date of Earliest Transaction (Month/Day/Year) 07/16/2010 |       |                                 |                  |  |   |                     |  |                | 6 In   | below)  | Officer (give title below)  |   |  | pecify   |
| (Street) MIDDL1 (City)  | ETOWN RI  |  | 02842<br>(Zip)                                 |                        | _   4.1   |   |       |                                 |                  |  |   |                     |  | Line           | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |   |   |  |  |
|   |   | Tab  | le I - Nor                                     | n-Deri                 | vativ   | e Se  | curit | ies A                           | cqu              | uired, [   | Disp                                      | osed o              | f, or B  | ene            | ficiall  | y Owned   |   |   |  |  |
| =: ::::: o: ccca:::; (:::c::: c)                                    |   | Date                                       | Transaction<br>te<br>onth/Day/Year)            |                        | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Yea |   | .     | 3.<br>Transac<br>Code (Ir<br>8) | saction Disposed |  | ities Acquired (A)<br>d Of (D) (Instr. 3, |                     |  |                | es<br>ally<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |  |
|   |   |  |  |                        |   |   |       |                                 |                  | Code   | v   | Amount              | (A)<br>(D)   | or             | Price  | Reported<br>Transact<br>(Instr. 3                                 | tion(s)   |   |  | (Instr. 4)   |
| Common  | Stock   |  |  | 07/1                   | 16/201  | .0  |       |                                 |                  | J <sup>(1)</sup>   |   | 5,000               | ) ]  | 4              | \$9.97   | 9.97 46,875 D   |   |   |  |  |
|   |   | -  | Гable II -                                     |                        |   |   |       |                                 |                  |  |   | sed of,<br>onvertil |  |                |  | Owned   |   |   |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                 | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day | Date, Transa<br>Code ( |   |   | of I  |                                 | Exp              | 6. Date Exercisab<br>Expiration Date<br>(Month/Day/Year) |   |                     | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Sect<br>(Instr. 3 and 4) |                |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)               | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | e<br>S<br>Illy                                      | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |  |  |                        | Code  | v   | (A)   | (D)                             | Dat              | te<br>ercisable  |   | xpiration<br>ate    | Title  | OI<br>Ni<br>Of | umber  |   |   |   |  |  |
| Director<br>Stock<br>Option-<br>Right to                            | \$9.97  | 07/16/2010                                 |  |                        | J <sup>(2)</sup>  |   |       | 5,000                           | 07/              | '27/2009 <sup>(3</sup>                                   | 3) 0                                      | 7/27/2010           | Commo<br>Stock   | n 5            | 5,000  | \$9.97  | 20,000 <sup>0</sup>   | (4)   | D  |  |

## **Explanation of Responses:**

- 1. Shares acquired via the exercise of an expiring stock option pursuant to the terms & conditions of the company's 2003 Incentive & Non-qualified Stock Option Plan.
- 2. Exercise of an expiring stock option pursuant to the terms & conditions of the company's 2003 Incentive & Non-qualified Stock Option Plan.
- 3. Date option fully vested.
- 4. Represents total vested/unexercised options "beneficially owned".

## Remarks:

07/19/2010 /s/ Stanley K. Honey

Date

\*\* Signature of Reporting Person

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.