FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI | IΡ |

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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

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* WHITE HARVEY | | | | | 2. Issuer Name and Ticker or Trading Symbol VIASAT INC [VSAT] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|--|--|---------|---------------|-------|--|---|--|--|-----------|--|-----|---|---|---|--|--|------|--|--|--|
| (Last) (First) (Middle) 6155 EL CAMINO REAL | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/21/2015 | | | | | | | | | | | officer (give title elow) | | Other (below) | (specify | |
| (Street) CARLSE | | | 92009 Zip) | | 4. If Amendment, Date of Original Filed (Month/Day | | | | | | | | ar) | | 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 | | | | | | | | | | | | | | | | | | | | |
| Date | | | | | /Day/Year) if any | | | . Deemed ecution Date, any onth/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, | | | nd Se Be Ov | Amount of curities neficially uned Following | Fori | Ownership m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount (A | | (A) or (D) | Price | Tra | Reported Transaction(s) (Instr. 3 and 4) | | | (msu. 4) | | |
| \$0.0001 p | 04/21 | 21/2015 | | | | G | G | | 1,200 D S | | \$0 | .00 | 51,300 | | I | By Trust | | | | |
| | 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) | ive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | Date, | 4. Transaction Code (Instr. 8) | | of Deri Secon Acq (A) of Disp of (I | of E | | . Date Exercisable and expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price Derivati Security (Instr. 5 | derivative Securities | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code V | | (A) | | | eate Expi exercisable Date | | Numb | | | | | | | | |

Explanation of Responses:

Remarks:

Kathleen K. Hollenbeck, under 04/23/2015 power of attorney

** 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.