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 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL OMB Number: 3235-0287

nours per response:	0.5
Estimated average burden	

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1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol VIASAT INC [VSAT]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Zlogar John</u>					1			<u> </u>]						Direct	or		10% O	wner	
							3. Date of Earliest Transaction (Month/Day/Year)									Officer (give title below)		Other (below)	specify	
(Last) (First) (Middle)							11/10/2011									Senior VI	ce Pr	esident		
6155 EL CAMINO REAL																				
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
CARLSBAD CA 92009											X Form filed by One Reporting Person									
													Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)													-				
		Tab	le I - Non	-Deriv	vative	e Se	curities	s Ac	quired,	Dis	posed o	f, or E	Bene	eficial	ly Owned	ł				
1. Title of Security (Instr. 3) 2. Transau Date (Month/Da				/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4		(A) or 3, 4 and	Benefici Owned F	es ally Following	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)) or	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
	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. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (l 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 N 0	umber						
stock option, right to	\$44.53	11/10/2011			A		20,000		(1)		11/10/2017	commo stock		0,000	\$0.00	20,000	0	D		

Explanation of Responses:

(2)

1. The option vests in 4 equal annual installments beginning on 11/10/12.

11/10/2011

2. Each restricted stock unit represents a contingent right to receive one share of ViaSat, Inc. common stock.

3. Subject to the reporting person's election to defer the receipt of common stock, the units vest and convert into shares of common stock of the Issuer at a rate of 1/4 on the 13th month anniversary of the grant date; 1/4th on the second anniversary of the grant date; 1/4th on the third anniversary of the grant date and 1/4 on the fourth anniversary of the grant date.

(3)

4. Until vested, the restricted stock unit shall be subject to forfeiture in the event of termination of employment or service with the issuer.

Α

6,667

Remarks:

huv restricted

stock unit

John Zlogar

commor

stock

(4)

11/15/2011 Date

6,667

D

6,667

\$0.00

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.

** Signature of Reporting Person