FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
-------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	ide. See		Filed							ies Exchang mpany Act o		1934		<u>[[</u>	nours p	er response:	0.5
Name and Address of Reporting Person* Kimbro Melinda Michele						2. Issuer Name and Ticker or Trading Symbol VIASAT INC [VSAT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (speci				
(Last) (First) (Middle) 6155 EL CAMINO REAL						3. Date of Earliest Transaction (Month/Day/Year) 03/10/2021								A t	below) below Chief People Officer			
(Street) CARLSE			2009 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) X F	,			
	`			n-Deriva	ative S	Secu	rities	Acq	uired,	, Dis	posed of	, or Be	enefic	ially O	wned			
Date				2. Transac Date (Month/Da	Execution Date,		,	Transaction Disposed Code (Instr. 5)		es Acquired (A) Of (D) (Instr. 3,		and Se Be	Amount of curities neficially vned Follo ported	F	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Pric	_ Tra	ansaction(s			(111511.4)
\$.0001 pa	ır value con	nmon stock		03/10/	2021				S		364	D	D \$53.94 8,904 D					
\$.0001 pa	01 par value common stock												836		I	By 401(k)		
		Tal									osed of, convertib				ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	cution Date, Transaction of			itive ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (I 3 and 4)				t of ies /ing ive y (Instr.	8. Price Deriva Securii (Instr. !	ive deriv y Secu i) Bene Own Follo Repo	owing orted saction(Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	Code V (A) (D)		Date Exercis	sable	Expiration Date		Amount or Number of Shares						

Explanation of Responses:

Remarks:

Kathleen K. Hollenbeck,

Attorney-in-Fact

03/12/2021

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.