

| OMB APPROVAL                                 |           |
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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*<br><u>Kimbro Melinda Michele</u> |         |          | 2. Issuer Name and Ticker or Trading Symbol<br><u>VIASAT INC [ VSAT ]</u> |  |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br>Director <input type="checkbox"/> 10% Owner <input type="checkbox"/><br><input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)<br><u>Chief People Officer</u> |  |  |
| (Last)  | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br><u>11/19/2021</u>     |  |  | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person  |  |  |
| <u>6155 EL CAMINO REAL</u>  |         |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                  |  |  |   |  |  |
| (Street)<br><u>CARLSBAD CA 92009</u>                                      |         |          |   |  |  |   |  |  |
| (City) (State) (Zip)  |         |          |   |  |  |   |  |  |

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3)       | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) |   | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |            |                | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------------|--------------------------------------|--|--------------------------------|---|---|------------|----------------|---|--|---|
|                                       |                                      |  | Code                           | V | Amount  | (A) or (D) | Price          |   |  |   |
| <u>\$.0001 par value common stock</u> | <u>11/19/2021</u>                    |  | <u>M</u>                       |   | <u>1,875</u>  | <u>A</u>   | <u>\$0.00</u>  | <u>11,971</u>   | <u>D</u>   |   |
| <u>\$.0001 par value common stock</u> | <u>11/19/2021</u>                    |  | <u>F<sup>(1)</sup></u>         |   | <u>988</u>  | <u>D</u>   | <u>\$48.82</u> | <u>10,983</u>   | <u>D</u>   |   |
| <u>\$.0001 par value common stock</u> |                                      |  |                                |   |   |            |                | <u>1,013</u>  | <u>I</u>   | <u>By 401(k)</u>                                      |

**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 Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |     | 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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |       |
|--|--|--------------------------------------|--|--------------------------------|---|--|-----|--|-----------------|---|--|--|---|--|-------|
|  |  |                                      |  | Code                           | V | (A)  | (D) | Date Exercisable   | Expiration Date |   |  |  |   |  | Title |
| <u>restricted stock unit</u>               | <u>\$0.00</u>  | <u>11/19/2021</u>                    |  | <u>M</u>                       |   | <u>1,875</u>   |     | <u>(2)</u>   | <u>(3)</u>      | <u>common stock</u>   | <u>1,875</u>                               | <u>\$0.00</u>  | <u>1,875</u>  | <u>D</u>   |       |

**Explanation of Responses:**

- This entry represents the number of shares of Viasat, Inc. common stock withheld by the Issuer to satisfy the tax withholding obligation of the Reporting Person. These shares were not sold by the Reporting Person but were instead offset from the total number of vested shares received by the Reporting Person from the Issuer.
- The original restricted stock unit grant was for 7,500 restricted stock units on 11/19/2018. Subject to the Reporting Person's election to defer the receipt of the common stock, the units vest and convert into shares of common stock (on a 1 for 1 basis) at the rate of 1/4 on the 13th month anniversary of the grant date; 1/4 on the second anniversary of the grant date; 1/4 on the third anniversary and 1/4 on the fourth anniversary of the grant date.
- Until vested, the restricted stock unit shall be subject to forfeiture in the event of termination of employment or service with the Issuer.

**Remarks:**

Kathleen K. Hollenbeck, 11/22/2021  
Attorney-in-Fact  
 \*\* 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.