FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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* <u>Moore Thomas Evans</u>							2. Issuer Name and Ticker or Trading Symbol VIASAT INC [VSAT]									all app Direc	olicable) ctor	10% C Other below)		Owner
(Last) (First) (Middle) 6155 EL CAMINO REAL					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2011										X	Officer (give title below) Seni				
(Street) CARLSBAD CA 92009 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv _ine) X	Forn	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
		Tab	le I - No	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, c	r Be	nefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			3. Transa Code (8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Pric	e	Transa	action(s) 3 and 4)			(Instr. 4)
\$.0001 pa	r value cor	nmon stock		06/07	/2011	2011			S		9,304 D		D	\$4:	1.74	0			D	
\$.0001 pa	.0001 par value common stock															700			I	By 401(k) plan
		Ta	able II -								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)			n Date, ay/Year) _	4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/E	on Dat Day/Ye		Amount of Securities Underlying Derivative Security (Instr. and 4)		f g Instr. 3 mount umber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C C	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

<u>Kathleen K. Hollenbeck, under power of attorney</u> <u>06/09/2011</u>

** 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.