## SEC Form 5

Washington, D.C. 20549

OMB APPROVAL

| OMB Number:              | 3235-0362 |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per response       | 10        |  |  |  |  |  |  |  |

| $\Box$ | Form 3 Holdings Reported.     |
|--------|-------------------------------|
| x      | Form 4 Transactions Reported. |

FORM 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

|  | •       |               | or Section 30(n) of the investment Company Act of 1940               |  |                                    |                       |  |  |  |
|--|---------|---------------|--|--|------------------------------------|-----------------------|--|--|--|
| 1. Name and Address of Reporting Person*       |         |               | 2. Issuer Name <b>and</b> Ticker or Trading Symbol VIASAT INC [VSAT] | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |                                    |                       |  |  |  |
| <u>Zlogar John</u>                             |         |               |  |  | Director                           | 10% Owner             |  |  |  |
| (Loot) (First)                                 | (Firot) | () (; -1-11-) | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)         | X  | Officer (give title<br>below)      | Other (specify below) |  |  |  |
| (Last) (First) (Middle)<br>6155 EL CAMINO REAL |         | (middle)      | 04/04/2014   | Senior VIce President  |                                    |                       |  |  |  |
| (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 |                       |  |  |  |
| P  |         |               |  |  | Form filed by More tha             | n One Reporting       |  |  |  |
| (City)   | (State) | (Zip)         |  |  | Person                             |                       |  |  |  |

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

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any | 3.<br>Transaction<br>Code (Instr. |                    |               | or Disposed Of               | 5. Amount of<br>Securities<br>Beneficially                     | 6.<br>Ownership<br>Form: Direct      | 7. Nature of<br>Indirect<br>Beneficial |
|---------------------------------|--|---|-----------------------------------|--------------------|---------------|------------------------------|--|--------------------------------------|--|
|                                 |  | (Month/Day/Year)                        | 8)                                | Amount             | (A) or<br>(D) | Price                        | Owned at end of<br>Issuer's Fiscal<br>Year (Instr. 3 and<br>4) | (D) or<br>Indirect (I)<br>(Instr. 4) | Ownership<br>(Instr. 4)                |
| \$.0001 par value common stock  | 12/20/2013                                 |   | G                                 | 423                | D             | <b>\$0.00</b> <sup>(1)</sup> | 9,153  | D                                    |  |
| \$.0001 par value common stock  | 12/31/2013                                 |   | P4                                | 160 <sup>(2)</sup> | A             | \$53.25                      | 9,313  | D                                    |  |
| \$.0001 par value common stock  |  |   |                                   |                    |               |                              | 1,098  | I                                    | By 401(k)                              |

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|   |   |  |   |   |     |     | -  |   |       |   |  |  |  |  |
|---|---|--|---|---|-----|-----|--|---|-------|---|--|--|--|--|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8) | of  |     | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |   |   | (A) | (D) | Date<br>Exercisable                            | Expiration<br>Date  | Title | Amount<br>or<br>Number<br>of<br>Shares              |  |  |  |  |

Explanation of Responses:

1. Gift of shares to charity.

2. This entry represents the number of shares the reporting person acquired under the ViaSat Employee Stock Purchase Plan.

Remarks:

Kathleen K. Hollenbeck, under 05/16/2014

<u>power of attorney</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.

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