FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPROVAL | | | | | | | |
|---|-------------------------|-----------|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | |
| l | Estimated average burde | en | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

| | Check this box if no longer subject to | | | | | | | |
|--------|--|--|--|--|--|--|--|--|
| \neg | Section 16. Form 4 or Form 5 | | | | | | | |
| \cup | 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* STENBIT JOHN P (Last) (First) (Middle) 6155 EL CAMINO REAL | | | | | | 2. Issuer Name and Ticker or Trading Symbol VIASAT INC [VSAT] 3. Date of Earliest Transaction (Month/Day/Year) 09/20/2012 | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below) | | |
|---|---|------------|---|------|--|--|-----|--|---|------------------|---|--|--|---|---|---|
| (Street) CARLSBAD CA 92009 (City) (State) (Zip) | | | (Zip) | _ | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | L | 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | | | | | | 3. Transa Code (| , Disposed of, or Benef 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) V Amount (A) or F | | | red (A) or str. 3, 4 a | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (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 | | 3A. Deemed Execution Date, if any (Month/Day/Yea | Code | saction (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerci Expiration Da (Month/Day/Yo | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisab | | epiration ate | Title | Amount or Number of Shares | 1 | | | |
| common stock option (right to buy) | \$38.21 | 09/20/2012 | | A | | 5,000 | | (1) | 09 | 9/20/2018 | common stock | 5,000 | \$0.00 | 5,000 | D | |
| restricted stock unit | (2) | 09/20/2012 | | A | | 1,600 | | (3) | | (4) | comon stock | 1,600 | \$0.00 | 1,600 | D | |

Explanation of Responses:

- 1. The option vests on Seotember 20, 2013.
- 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 continued service as a Director of the Issuer, this award will vest and convert into shares of common stock of the Issuer on September 20, 2013.
- 4. Until vested, the restricted stock unit shall be subject to forfeiture in the event of termination of of directorship with the Issuer.

Remarks:

Kathleen K. Hollenbeck, under power of attorney 09/24/2012

** 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.