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Form 4	VEN K								
November 1	3, 2009								
FORM	14	ST A TES	SECU	DITIES		СПАЛСЕ	COMMISSIO	T	PPROVAL
	UNITED	SIAIES		shington				N OMB Number:	3235-0287
Check th if no lon subject to Section 1 Form 4 of Form 5 obligation may con See Instr	Section Public U	SECUI 16(a) of th Itility Hol	RITIES ne Securit ding Cor	ties Excha	burden H respons nge Act of 1934, of 1935 or Section		January 31, 2005 d average ours per e 0.5		
1(b).									
(Print or Type	Responses)								
1. Name and A HART STE	Address of Reporting EVEN R	Person [*]	Symbol	er Name an AT INC [V		Trading	5. Relationship o Issuer		
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Che	eck all applicabl	e)
6155 EL CAMINO REAL			(Month/Day/Year) 11/10/2009			Director 10% Owner X Officer (give title Other (specify below) below) Chief Technical Officer			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CARLSBA	D, CA 92009						Person	More than One K	eporung
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4)	(A) or of (D)	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)
Reminder: Rer	oort on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.		
1	·				Perso inforn requir	ns who res nation cont ed to resp lys a curre	spond to the colle lained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	of Underlying	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	Securities	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/	Year) (Instr.	8) Acquired or Dispos (D) (Instr. 3, 4 and 5)	ed of			(Instr. 3 and	4)	(Inst
			Code	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
deferred restricted stock units	<u>(1)</u>	11/10/2009	А	14,000		(2)	(3)	common stock	14,000	4

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
HART STEVEN R 6155 EL CAMINO REAL CARLSBAD, CA 92009			Chief Technical Officer	
Signatures				

Reporting Person

Steve Hart	11/12/2009
<u>**Signature of</u>	Date

Explanation of Responses:

- * 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).
- (1) Each deferred restricted stock unit represents a contingent right to receive one share of ViaSat, Inc. common stock

Subject to the reporting person's election to defer the receipt of common stock, the units vest and convert into shares of common stock of (2) the issuer at the rate of 1/4th on the 13th month anniversary of the grant date; 1/4th on the second anniversary of the grant date; 1/4th on the third anniversary of the grant date and 1/4th on the fourth anniversary of the grant date.

(3) Until vested, the restricted stock unit shall be subject to forfeiture in the event of termination of employment with the issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.