

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Allred L. Chance					Vivint Solar, Inc. [VSLR]							Director	,	10	% Owner		
(Last) (First) (Middle)				3.]	3. Date of Earliest Transaction (MM/DD/YYYY)							X_Officer (g	Sheets: 1576 White: X Officer (give title below) Other (specify below) Chief Sales Officer				
1800 WEST ASHTON BLVD					11/20/2018												
	(St	reet)		4.]	lf An	nendme	ent, Date C	Origin	nal File	ed (MM/I	DD/YYYY	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)	
LEHI, UT 84043													X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	City) (S	state) (Zij	p)														
			Table I	- Non-Dei	ivat	ive Sec	urities Ac	quir	ed, Di	sposed	of, or B	eneficially Own	ed				
.			Trans. Date	Exec	Deemed ution , if any	3. Trans. Co (Instr. 8)	ode	or Disp	posed of (I 3, 4 and 5)	()	5. Amount of Securi Following Reported (Instr. 3 and 4)	ities Beneficially Owned I Transaction(s)		Ownership of Form:	7. Nature of Indirect Beneficial		
							Code	V	Amou	(A) or (D)	Price					Ownership (Instr. 4)	
Common Stock 11/20/20				11/20/2018			M		3489	A	\$1.00	1	173040		D		
Common Stock 11/20/20				11/20/2018			S (1)		3489	D	\$6.00	169551		D			
	Tal	ble II - Deri	ivative S	ecurities l	Bene	ficially	Owned (e.g. ,	, puts,	calls, w	arrant	s, options, conve	ertible sec	urities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deem Execution Date, if an	(Instr. 8)	Securities		s Acquired isposed of		te Exercisable and ration Date		Securitie	Underlying Derivative Security Derivative Security		derivative Securities Beneficially Owned Following	Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exerc	isable I	Expiration Date	Title	Amount or Number of Shares	Number of Tra	Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		
Stock Option (Right to Buy)	\$1.00	11/20/2018		M			3489	((2)	8/18/2023	Commo Stock	on 3489	\$0.00	68627	D		

Explanation of Responses:

- (1) The sales reported by Mr. Allred were effected pursuant to a Rule 10b5-1 trading plan.
- (2) One-third of this option vests annually in five equal installments beginning 11/16/13. The remaining two-thirds of the outstanding options vest as follows: (1) one-half will vest if and upon the date that is the sooner of (a) 313 Acquisition LLC receives a return on its invested capital at a pre-established threshold or (b) the Company's aggregate equity market capitalization is equal to or greater than \$1 billion on a date no sooner than 240 days after the commencement of this offering, and (2) one-half of the shares vest if and upon the date that 313 Acquisition LLC receives an additional return on its investment at a second pre-established threshold.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Allred L. Chance 1800 WEST ASHTON BLVD			Chief Sales Officer				
LEHI, UT 84043							

Signatures

/s/ Dana C. Russell, 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 control number.	