**EchoStar CORP** Form 4 March 07, 2008

# FORM 4

#### **OMB APPROVAL OMB**

3235-0287

January 31,

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average burden hours per response... 0.5

Number:

Expires:

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

1(b).

(Last)

Security

(Instr. 3)

(Print or Type Responses)

may continue.

See Instruction

1. Name and Address of Reporting Person \* MOSKOWITZ DAVID K

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol EchoStar CORP [SATS]

(Middle)

3. Date of Earliest Transaction

X\_ Director 10% Owner Other (specify Officer (give title

(Check all applicable)

90 INVERNESS CIRCLE EAST

(First)

(Street)

(Month/Day/Year)

03/06/2008

6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

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

below)

ENGLEWOOD, CO 80112

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed

4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Indirect Beneficial Owned Ownership Following (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative **Expiration Date** Underlying Securities Security or Exercise Code Securities (Month/Day/Year) (Instr. 3 and 4) (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A)

#### Edgar Filing: EchoStar CORP - Form 4

Derivative or Disposed of Security (D) (Instr. 3, 4,

and 5)

Code V (A) Expiration Date Title (D) Date

Exercisable

Numbe

Amoun

of Shar

**Employee** 

Stock Class A  $D_{\underline{-}1}^{(1)}$ (2) 03/31/2015(1) Common 60,00 Option \$ 24.69 03/06/2008 60,000 (Right to Stock

Buy)

# Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

MOSKOWITZ DAVID K 90 INVERNESS CIRCLE EAST X ENGLEWOOD, CO 80112

### **Signatures**

/s/ David K. Moskowitz, by Brandon Ehrhart, his Attorney in 03/07/2008 Fact

> \*\*Signature of Reporting Person 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) The option was cancelled by mutual agreement between DISH Network and Mr. Moskowitz.
- The shares undelying the option were subject to achievement of certain performance criteria and were scheduled to vest at the rate of 10% per year commencing March 31, 2006 until March 31, 2009 and then at the rate of 20% per year thereafter.

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.

Reporting Owners 2