DISH Network CORP Form 4

February 25, 2015

## FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
16.
SECURITIES

Form 5 obligations may continue. See Instruction 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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * CLAYTON JOSEPH P |         |          | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>DISH Network CORP [DISH] | 5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)                             |  |  |
|--|---------|----------|---|--|--|--|
| (Last)   | (First) | (Middle) | 3. Date of Earliest Transaction   | (Check an applicable)  |  |  |
| 9601 S. MERIDIAN BLVD.                                     |         |          | (Month/Day/Year)<br>02/23/2015  | _X_ Director 10% Owner _X_ Officer (give title Other (specify below)  President and CEO              |  |  |
| (Street)   |         |          | 4. If Amendment, Date Original  | 6. Individual or Joint/Group Filing(Check  |  |  |
| ENGLEWOOD, CO 80112  |         |          | Filed(Month/Day/Year)   | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |

|                                      |   | Torson  |   |  |         |             |  |  |   |  |
|--------------------------------------|---|---|---|--|---------|-------------|--|--|---|--|
| (City)                               | (State)                                 | (Zip) Tab   | le I - Non-l                            | Derivative S                                 | ecurit  | ies Acqui   | red, Disposed of   | , or Beneficial  | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code<br>(Instr. 8) | 4. Securitie<br>onor Dispose<br>(Instr. 3, 4 | d of (I | ))          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Class A<br>Common<br>Stock           | 02/23/2015                              |   | M <u>(1)</u>                            | 125,000<br>(1)                               | A       | <u>(2)</u>  | 244,334 (3)  | D  |   |  |
| Class A<br>Common<br>Stock           | 02/23/2015                              |   | F(4)                                    | 59,726<br>(4)                                | D       | \$<br>78.31 | 184,608 (3)  | D  |   |  |
| Class A<br>Common<br>Stock           |   |   |   |  |         |             | 319  | I  | I (5)   |  |

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

#### Edgar Filing: DISH Network CORP - Form 4

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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         | r of         | 6. Date Exercisab | le and             | 7. Title and A             | Amou               |
|------------------------------|---|---------------------|-------------------------|-----------------|-------------------|--------------|-------------------|--------------------|----------------------------|--------------------|
| Derivative                   | Conversion  | (Month/Day/Year)    | Execution Date, if      | Transactio      | onDerivative      | e            | Expiration Date   |                    | Underlying Securi          |                    |
| Security (Instr. 3)          | or Exercise<br>Price of<br>Derivative<br>Security |                     | any<br>(Month/Day/Year) | Code (Instr. 8) | Code Securities ( |              | (Month/Day/Year)  |                    | (Instr. 3 and 4)           |                    |
|                              |   |                     |                         | Code V          | (A) (             | (D)          | Date Exercisable  | Expiration<br>Date | Title                      | Amo<br>Nun<br>Shar |
| Restricted<br>Stock<br>Units | (2)   | 02/23/2015          |                         | M(1)            |                   | 5,000<br>(1) | 02/23/2015(1)     | 03/31/2015         | Class A<br>Common<br>Stock | 125                |

# **Reporting Owners**

| Reporting Owner Name / Address                                    | Relationships |           |                   |       |  |  |  |  |
|---|---------------|-----------|-------------------|-------|--|--|--|--|
| 1   | Director      | 10% Owner | Officer           | Other |  |  |  |  |
| CLAYTON JOSEPH P<br>9601 S. MERIDIAN BLVD.<br>ENGLEWOOD, CO 80112 | X             |           | President and CEO |       |  |  |  |  |

### **Signatures**

/s/ Joseph P. Clayton, by Brandon Ehrhart his Attorney in Fact 02/25/2015

\*\*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) Pursuant to the terms of the reporting person's restricted stock unit agreements, 125,000 restricted stock units vested on February 23, 2015.
- (2) Each restricted stock unit converts into one share of stock upon vesting, which is issued to the reporting person immediately upon vesting.
- (3) Includes shares aguired under the Company's Employee Stock Purchase Plan.
- (4) Represents shares withheld to cover certain tax obligations in connection with the vested restricted stock units listed in Table II.
- (5) By 401(K).

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.

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