FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF CHANG	<b>IES IN BENEF</b>	ICIAL OWN	FRSHIP

OMB APPI	ROVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 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* <u>TARR JEFFREY R</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  EchoStar CORP [ SATS ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				-	1100	tuz O	<u> </u>	_[ 01110 ]				X Directo	or		10% Ow	ner		
(Last)	`	rst) ERRACE EAST	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2019								Officer (give title below)			Other (specify below)	
					4.1	f Amer	ndment,	Date	of Original File	ed (Month/l	Day/Year)	6. lı	ndividual or 3	loint/Group	Filing	(Check Apr	licable	
(Street) ENGLE	WOOD CO	0	80112									Line	X Form f	,	•	rting Persor		
(City)	(S	tate)	(Zip)		-								Persor	1				
		Tab	le I - Noi	າ-Deriv	vativ	e Sec	curitie	s A	cquired, Di	sposed	of, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		Code (Ins	on Dispos	rities Acqui ed Of (D) (In		and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code V	Amour	t (A) (D)	Price	Transact	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)			
		٦							quired, Dis s, options,				Owned					
1. Title of Derivative Security (Instr. 3)	vative   Conversion   Date   Execution Date, irity   or Exercise   (Month/Day/Year)   if any   Code (Ins						of s ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- Employee Director Stock Option	\$44.54	07/01/2019			A		5,000		07/01/2019 <sup>(1)</sup>	07/01/202	Class A Commor Shares	5,000	\$0	5,000		D		

## **Explanation of Responses:**

1. The shares underlying the option were 100% vested upon the date of grant.

## Remarks:

/s/ Joseph Turitz, his Attorneyin-Fact

07/03/2019

Date

\*\* Signature of Reporting Person

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

- $^{\star}$  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.