FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person* MOSKOWITZ DAVID K					2. Issuer Name and Ticker or Trading Symbol ECHOSTAR COMMUNICATIONS CORP									Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				[[[DISH]								X Directo		10% O			
(Last) (First) (Middle) 9601 SOUTH MERIDIAN BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2005								helow)		Other (below) unsel and Sec.	specify	
(Street) ENGLEWOOD CO 80112				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	e) <mark>X</mark> Form f	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(Si	ate)	(Zip)										Persor					
		Tab	le I - Noi	n-Deriv	/ativ	e Se	curit	ies Ac	quired,	Dis	posed o	f, or Be	neficial	ly Owned	i			
			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.				Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	r Price	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)	
Class A Common Stock				02/10/2005		5			М		48,000	0 A	\$2.12	25 509	9,970	D		
Class A Common Stock													32	,984	I	I ⁽¹⁾		
Class A Common Stock													17	,333	I	I ⁽²⁾		
Class A Common Stock													8,	184	I	I(3)		
Class A Common Stock													1,	328	I	I ⁽⁴⁾		
		٦	Гable II -								osed of, onvertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	Code (Ins				6. Date E Expiratio (Month/D	n Date	of Secu		ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$2.125	02/10/2005			M			48,000	(5)		(6)	Class A Common Stock	48,000	\$0	30,184	1 D		

Explanation of Responses:

- 1. The shares were contributed by the reporting person to a charitable foundation. The reporting person is a member of the Board of Directors for the charitable foundation and has both investment control and voting power for the foundation. The reporting person disclaims beneficial ownership of the shares
- 2. By 401(k)
- 3. The shares held by the reporting person in trust for the benefit of the children of Charles W. Ergen, the Chief Executive Officer of the Company. The reporting person disclaims beneficial ownership of the
- 4. The shares are held by the reporting person as custodian for his minor children.
- 5. The shares underlying the option vested at the rate of 20% per year, commencing on March 31, 1998.
- 6. Each portion of the option expires five years from the date on which that portion of the option first becomes available.

Remarks:

02/14/2005 /s/ David K. Moskowitz

** 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 Number.