FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*						2. Issuer Name and Ticker or Trading Symbol DISH Network CORP [DISH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>DEFRANCO JAMES</u>							DISTITUCT [DISTI]									Direc	ctor		10% C	wner	
(Last) (First) (Middle) 9601 S. MERIDIAN BLVD.							3. Date of Earliest Transaction (Month/Day/Year) 11/12/2018								X Officer (give title below) Executive V			Other (specify below) Vice President			
(Street) ENGLEWOOD, CO 80112						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Appli Line) X Form filed by One Reporting Person Form filed by More than One Reportir					on	
(City)	(St	ate) (Zip)														on				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date					saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)							Securi Benefi Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	mount (A) or (D)		Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)				
Class A Common Stock 11/12							2018		P ⁽¹⁾		10,000 A \$		\$3	1.77	1,293,529			D			
Class A Common Stock																1,2	250,000		I	I (2)	
Class A Common Stock																1,9	905,059		I	I ⁽³⁾	
Class A Common Stock																5	50,000		I	I ⁽⁴⁾	
Class A Common Stock															19,827		9,827		I	I ⁽⁵⁾	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			n Date,		Transaction of Code (Instr. Deriv		rative rities ired r osed)	6. Date E Expiratic (Month/E	on Dat	Amoun Securit Underly Derivat		Amount of Securities Underlying Derivative Security (Instr. 3		Deri Sec	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O Fe Di oi (I)	D. wnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisa		Expiration Date	Title	of									

Explanation of Responses:

- 1. The transactions reported on this Form 4 were effected pursuant to a 10b5-1 trading plan.
- 2. The shares are held by the reporting person as a general partner of a limited partnership.
- 3. The shares are held by the reporting person as a general partner of a different limited partnership.
- 4. The shares are held by the reporting person in an irrevocable trust for the benefit of the reporting person's children and grandchildren. The reporting person disclaims beneficial ownership of the shares.
- 5. By 401(k).

Remarks:

/s/ James DeFranco, by

Brandon Ehrhart, his Attorney 11/14/2018

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 Number.