FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									

0.5

hours per response:

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

1. Name and Address of Reporting Person* GATES WILLIAM H III						2. Issuer Name and Ticker or Trading Symbol MICROSOFT CORP [MSFT]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GATES WILLIAM III											_			X	Direc	ctor	10%	Owner	
(Last) ONE MIC	Last) (First) (Middle) ONE MICROSOFT WAY					3. Date of Earliest Transaction (Month/Day/Year) 05/04/2007									Offic below	er (give title w)	Other (specify below)		
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) REDMOND WA 98052														X Form filed by One Reporting Person					
				-										Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tabl	e I - No	n-Deri\	/ative	Sec	uritie	s Ac	quired,	, Dis	posed o	f, or	Bene	ficially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Trans Date (Month)						ction 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp Code (Instr. 5)		Disposed	ecurities Acquired (A) posed Of (D) (Instr. 3, 4			5. Amo Securi Benefi Owned	ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D) Pr		rice	Transa	ction(s) 3 and 4)		(1113111 4)		
Common Stock 05/04/2							2007		S		10,000)]) \$	\$30.34	906,532,336		D		
Common Stock 05/04/2						2007		S		33,000)])	\$30.3	906,499,336(1)		D			
		Та									osed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		e Amount of		De Se (Ir	Price of crivative curity str. 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 Exercisa		Expiration Date	Title	Amou or Numb of Share	per					

Explanation of Responses:

1. In addition, there are 425,066 shares owned by reporting person's spouse. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purposes.

Remarks

* Duly authorized under Special Power of Attorney appointing Michael Larson attorney-in-fact, dated February 3, 2006, by and on behalf of William H. Gates III, filed as Exhibit 99.1 to Cascade Investment, L.L.C.'s Amendment No. 2 to Schedule 13G with respect to Arch Capital Group Ltd. on March 7, 2006, SEC File No. 005-45257, and incorporated by reference herein.

William H. Gates III By: /s/

Michael Larson*, Attorney-In- 05/08/2007

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.