## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	Check this box if no longer subject to
$\neg$	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

Name and Address of Reporting Person*     GATES WILLIAM H III						2. Issuer Name and Ticker or Trading Symbol MICROSOFT CORP [ MSFT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) ONE MICROSOFT WAY						3. Date of Earliest Transaction (Month/Day/Year) 11/04/2009										Office below	er (give title		Owner r (specify v)	
(Street)  REDMOND WA 98052  (City) (State) (Zip)					_   4. -	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	eI-	Non-Deriv	/ativ	e Sec	uritie	s Ac	quir	ed, I	Disp	osed o	f, or E	Benefic	cially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution (ear) if any		ion Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5) Secur Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								C	Code		Amoi	ount	(A) or (D) Price			Transaction(s) (Instr. 3 and 4)			(11311. 4)	
Common Stock 11/04/					09	9		S	(1)		3,00	00,000	D	\$28.12	274 <sup>(2)</sup>	700,	136,862 <sup>(3)</sup>	D		
		Та	ble	II - Derivat (e.g., p								sed of, onvertib				wned				
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 and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisabl		expiration Pate	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. The sales reported in this filing were made pursuant to the reporting person's 10b5-1 sales plan.
- 2. This transaction was executed in multiple trades at prices ranging from \$27.70 to \$28.36. The price reported above reflects the weighted-average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.
- 3. In addition, there are 424,816 shares owned by the 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:

/s/ Alan Heuberger, Attorneyin-fact for William H. Gates III

11/06/2009

\*\* 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.