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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).

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses	)	<u> </u>									
1. Name and Address of Reporting Person <sup>*</sup> – BARRY THOMAS D			2. Issuer Name and SIRIUS XM HOI		-			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (First) (Middle) 1221 AVENUE OF THE AMERICAS			3. Date of Earliest Transaction (Month/Day/Year) 08/05/2016						X_Officer (give title below) Other (specify below)   Senior VP & Controller		
(Street) NEW YORK, NY 10020			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - N	on-D	erivative Se	ecuritie	s Acqu	ired, Disposed of, or Beneficially Owne	ed	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Reported Transaction(s)	Ownership Form:	Beneficial
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		08/05/2016		А		119,415 ( <u>1</u> )	А	\$0	279,985	D	
Common Stock		08/05/2016		F		17,265 ( <u>2)</u>	D	\$ 4.23	262,720	D	
Common Stock									13,997	Ι	By 401(k) Plan

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

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 control number.

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	)	5. Number Derivative Securities Acquired ( or Dispose (D) (Instr. 3, 4, and 5)	A) d of	6. Date Exerci Expiration Dat (Month/Day/Y	te	7. Title and Amount of Underlying Securities		Derivative Security (Instr. 5)	urity Securities ttr. 5) Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
				Code	v	(A)		Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (Right to Buy)	\$ 4.24	08/05/2016		А		682,965 <u>(3)</u>		08/05/2017	08/05/2026	Common Stock	682,965	\$ 4.24	682,965	D	

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BARRY THOMAS D 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020			Senior VP & Controller					

# Signatures

/s/ Thomas D. Barry	08/09/2016
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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).
- (1) Restricted Stock Units will vest as follows: 39,805 8/5/17; 39,805 8/5/18 and 39,805 8/5/19.
- (2) Represents the surrender of common stock to the Company to cover withholding taxes upon the vesting of restricted stock units.
- (3) Options will vest as follows: 227,655 8/5/17; 227,655 8/5/18 and 227,655 8/5/19.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.