FORM 4
--------

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: Estimated average burden hours per response... 3235-0287

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)													
1. Name and Address of Reporting Person – COOK STEPHEN				2. Issuer Name and Ticker or Trading Symbol SIRIUS XM HOLDINGS INC. [(SIRI)]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 			
(Last) (First) (Middle) 1290 AVENUE OF THE AMERICAS				3. Date of Earliest Transaction (Month/Day/Year) 04/23/2019						X_Officer (give title below)Other (specify below) EVP, Sales and Automotive			
(Street) NEW YORK, NY 10104				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Dack Applicable Line) X. Form filed yoo Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Zip)		Table I - Non-Derivative Securities Acqu							red, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3) (Month/De			Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)		

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. SEC 1474 (9-02)

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

(e.g., puts, cans, warrants, options, convertible securities)															
1. Title of Derivative Security	2. Conversion or	3. Transaction Date	3A. Deemed	4. Transaction Code		5. Number of Derivative		6. Date Exercisable and		7. Title and Amount of Underlying		8. Price of	9. Number of	10.	11. Nature
(Instr. 3)	Exercise Price of	(Month/Day/Year)	Execution Date, if	(Instr. 8)		Securities Acquired (A) or		Expiration Date		Securities		Derivative	Derivative	Ownership	of Indirect
	Derivative		any			Disposed of (D)		(Month/Day/Year)		(Instr. 3 and 4)		Security	Securities	Form of	Beneficial
	Security		(Month/Day/Year)			(Instr. 3, 4, and 5)		1				(Instr. 5)	Beneficially	Derivative	Ownership
													Owned	Security:	(Instr. 4)
								_					Following	Direct (D)	
								Date	le Date Expiration Titl	Title	Amount or Number of Shares		Reported	or Indirect	
								Exercisable					Transaction(s)	(I)	
				Code	V	(A)	(D)						(Instr. 4)	(Instr. 4)	

# **Reporting Owners**

		Relationships								
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
	COOK STEPHEN 1290 AVENUE OF THE AMERICAS NEW YORK, NY 10104			EVP, Sales and Automotive						

### Signatures

/s/Patrick L. Donnelly, attorney in fact 05/13/2019 Date e of Reporting Perso

# **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).

#### **Remarks:**

In connection with the reorganization by Sirius XM Holdings Inc. ("Sirius XM") of its executive management and reporting structures, the Board of Sirius XM determined that the reporting person's policy making functions have changed

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.