FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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).

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 Ty | pe Response | s) | | | | | | | | | | 1 | | | | | |
|--|---|--|-------------------------------------|--|-------------|---|-----------------------|---------|--|-----------------|---|--|-----------------|--|--------------------|--|--|
| 1. Name and Address of Reporting Person * MOONEY JAMES | | | | 2. Issuer Name and Ticker or Trading Symbol SIRIUS XM HOLDINGS INC. [(SIRI)] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner | | | | | | |
| (Last) (First) (Middle) 1290 AVENUE OF THE AMERICAS | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/06/2019 | | | | | | | Office | er (give title belo | ow) | _ Othe | r (specify be | low) | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_ Form fil | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | ORK, NY | | | | | | | | | | | | ed by More than | One Reporti | ing i crac | | |
| (City |) | (State) | (Zip) | | | Tab | le I - N | on-D | erivative | Securitie | es Acq | uired, Disp | osed of, or I | Beneficiall | y Ow | ned | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | | 2A. Deemed Execution Date any (Month/Day/Y | | if Code (Instr. 8) | | | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership In Form: | | Nature of direct eneficial wnership |
| | | | | | | ai) | Code | V | (A) or | | , (| | | direct (I | nstr. 4) | | |
| Common | Stock | | 06/06/2019 | | | | A | | 33,207 (1) | 7 A | \$ 0 | 177,580 | | | D | | |
| Common Stock | | | | | | | | | | | | 9,100 | | | | y ustodian or Child | |
| Reminder: | Report on a s | separate line fo | or each class of secu | rities be | eneficially | own | ned dire | ectly o | r indirect | ly. | | | | | | | |
| | | | | | | | | COI | ntained i | n this fo | orm a | o the colled are not requirently valid | uired to res | spond un | less | SEC 1 | 474 (9-02) |
| | | | | | tive Secu | | - | | | | | ially Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Y | n 3A. Deemed Execution Da any | 4. Transaction Code Year) (Instr. 8) | | 5. N of D So A (A D of | 5. 6. l Number and | | Date Exercisable and Expiration Date Month/Day/Year) | | 7. Ai Ui Se | Title and mount of nderlying ecurities nstr. 3 and | | 9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e s llly on(s) | Ownersh Form of Derivativ Security: Direct (D or Indirec (I) (Instr. 4) | Beneficial Ownersh (Instr. 4) (D) rect |
| | | | | | Code V | V (| A) (D | | te ercisable | Expiration Date | on Ti | Amount or Number of Shares | | | | | |

Reporting Owners

| | Relationships | | | | | | |
|--------------------------------|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| MOONEY JAMES | | | | | | | |
| 1290 AVENUE OF THE AMERICAS | X | | | | | | |
| NEW YORK, NY 10104 | | | | | | | |

Signatures

| /s/Patrick L. Donnelly, attorney in fact | 06/06/2019 | | | |
|--|------------|--|--|--|
| **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 on June 6, 2020.

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.