FORM 4

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

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

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

| (I IIII OI I y | pe Response | s) | | 1 | | | | | - | | | | | |
|--|---------------------------------------|--|--------------|--|--|---|----------------------------------|-----------------------------|--|--|--------------------------------------|---|--|------------------------------------|
| 1. Name and Address of Reporting Person * BARRY THOMAS D | | | | 2. Issuer Name and Ticker or Trading Symbol SIRIUS XM HOLDINGS INC. [(SIRI)] | | | | | | 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) 09/18/2020 | | | | | | 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) | Т | able I - N | on-Dei | ivative S | ecurities | Acqui | ired, Dispo | sed of, or I | Beneficially | Owned | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Year) | • | (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Beneficially Owned Following Reported Transaction(s) | | | Ownership of Form: | Beneficial | |
| | | | | (Month/Day/Year | Code | V | Amoun | (A) or (D) | Price | (Instr. 3 a | or India (I) | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Commor | Stock | | 09/18/2020 | | A | | 193,79 (1) | 8 A | \$ 0 | 453,371 | 71 | | D | |
| Common Stock | | | | | | | | | 14,104 | | I | By 401(k) Plan | | |
| Reminder: | Report on a s | separate line fo | | Derivative Securit | ies Acqui | Pers cont the t | sons wh tained ir form dis | responding this for plays a | rm are curre | not requ | | formation spond unle trol numbe | ess | 1474 (9-02) |
| 1. Title of | | 3. Transactio | n 3A. Deemed | (e.g., puts, calls, w | 5. | 6. D | ate Exerc | isable | 7. T | itle and | | 9. Number | | 11. Nat |
| Security | Conversion or Exercise Price of | | | tte, if Transaction Code (Instr. 8) | of Derivativ Securities | e (Mo | (Month/Day/Year) Un Sec | | Und Secu (Inst | ount of erlying urities tr. 3 and | Derivative Security (Instr. 5) | Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Security Direct (I or Indire | Beneficia Ownersh (Instr. 4) |
| (Instr. 3) | Derivative Security | | | | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | 4) | | | Reported Transaction | or India (I) | ect |

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/Patrick L. Donnelly, attorney in fact | 09/21/2020 |
|--|------------|
| **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).
- $\textbf{(1)} \ \, \text{Approximately one-third of restricted stock units will vest on each of } 9/18/2021, 9/18/2022 \ \, \text{and } 9/18/2023.$

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.