FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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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

	pe Response															
1. Name and Address of Reporting Person *- RYAN MARY PATRICIA				2. Issuer Name and Ticker or Trading Symbol SIRIUS SATELLITE RADIO INC [(SIRI)]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner					
(Last) (First) (Middle) 1221 AVENUE OF THE AMERICAS				3. Date of Earliest Transaction (Month/Day/Year) 03/24/2004						Ī	X Officer (give title below) Other (specify below) EVP, Marketing					
(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					
(Ci	ty)	(State)	(Zip)	Table I - Non-			I - Non-Do	Derivative Securities Acqu			nired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(D)	Owned Following I Transaction(s)		urities Beneficially g Reported		nership m:	7. Nature of Indirect Beneficial Ownership		
				(William	ui/Day/1 eai	Co	le V	Amount	(A) or (D)	Price	or Indirect (I)					
Commor	Stock		03/24/2004			N.		200,000	A	\$ 1.04	1,297,809		D			
Commor	Stock		03/24/2004			S		200,000	D	\$ 3.1	1,097,809			D		
Commor	Stock										16,700		т		By 401(k)	
											10,700					Plan
		separate line for each		í - Deriv	rative Secur	ities Acc	Perso in this a curr quired, Dis	form are ently val	e not re id OMB or Benef	quired to contro	collection to respon I number.	of informa I unless th			-	
	Report on a s	3. Transaction	Table II 3A. Deemed Execution Date, if	[- Deriv (e.g.,] 4. Transact Code	rative Secur puts, calls, v 5. Num Deriva Securit Acquir	ber of ive ies ed (A) osed of	Perso in this a curr quired, Dis	form are ently val posed of, convertible ercisable a Date	e not re id OMB or Benef e securit	quired to control icially Oties) 7. Title of Under Securities	collection to respon I number. Dwned and Amoun	t 8. Price	of 9. Noive Derive Secution Own Folio Report	Number of ivative urities deficially ned lowing	SEC 1 10. Ownersh Form of Derivativ Security: Direct (I or Indirec	11. Naturip of Indire Benefici (Instr. 4)
Reminder: 1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	[- Deriv (e.g.,] 4. Transact Code	tative Secur puts, calls, v 5. Num Deriva Securit Acquir or Disp (D) (Instr.:	ber of ive ies ed (A) osed of	Perso in this a curr quired, Dis 6, options, 6 Expiration	consection are entity values on the convertible convertible and the convertible of the co	e not re id OMB or Benef e securit nd	quired to control icially Oties) 7. Title of Under Securities	collection to respon I number. Owned and Amoun	t 8. Price Derivat Security (Instr. 5	of 9. Notive Derive Secution Own Folice Report Trans	Jumber of ivative urities neeficially ned lowing ported insaction(s)	SEC 1 10. Ownersh Form of Derivativ Security: Direct (I or Indirec	11. Natur of Indire Benefici Ownersk (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
RYAN MARY PATRICIA					
1221 AVENUE OF THE AMERICAS			EVP, Marketing		
NEW YORK, NY 10020					

Signatures

/s/ Ryan, Mary Patricia	03/25/2004
**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).

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.