FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20540
vvasiiiigtoii,	D.C.	20048

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	urden								
-	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)

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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Leidos Holdings, Inc. [LDOS] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)																
Geer Noel B					=	Ecidos Holdings, Inc. [EDOS]								1 3	X Director			10% Ov	wner		
(Last)	(Fi	rst)		3. Date of Earliest Transaction (Month/Day/Year) 05/03/2024									Officer (give title below)			Other (s below)	specify				
1750 PRESIDENTS STREET					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)								plicable							
(Street)						X Form filed by One Reporting Person															
RESTON	N VA	A	20190												Form filed by More than One Reporting Person						
(City)	(St	ate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication															
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
·······				Date	ransaction e onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			, Transaction Disponent Code (Instr. 5)		Disposed	urities Acquired (A) or sed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)				
Common Stock 0:					3/202	3/2024			A		912	912 A		\$ <mark>0</mark>	30,83	30,836.8435		D			
Common Stock															29	29,894		I	by Family Trust		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transa Code (8)		5. Number of		Date Exercisat Expiration Date (Month/Day/Year)		Amount of			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ve es ially ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
			Code	v	(A)	(D)	Dat Exe	te ercisable		expiration Pate	Title	O N	umber								
Stock Option (Right to Buy)	\$142.66	05/03/2024			A		1,179		05/	/03/2025 ⁽¹	0	5/02/2031	Commo Stock	1 1	1,179	\$0	1,179)	D		

Explanation of Responses:

1. The option shall vest and become exercisable in full on the earlier of (i) the first anniversary of the Grant Date, or (ii) the date that the next annual meeting of the stockholders of the Company is concluded.

Remarks:

/s/ Ramune M. Kligys by PoA of Noel B. Geer

05/07/2024

** Signature of Reporting Person

Date

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

- * 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.

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 Number.