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 | |
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OMB APPROVAL 3235-0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response: 0.5

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

| | Name and Address of Reporting Person* KRONE ROGER A | | | | | 2. Issuer Name and Ticker or Trading Symbol Leidos Holdings, Inc. [LDOS] | | | | | | | | | lationship ck all app Direc | licable) | ing Pe | erson(s) to 10% C | |
|---|---|--|--|--|---|--|---|---|------------------|----------------------------------|------------------------|---------------|---|--|---|---|---|---|---------------------------------------|
| (Last) 1750 PR | (Fir | , | Middle | e) | 3. Date of Earliest Transaction (Month/Day/Year) 03/08/2022 | | | | | | | | | X | X Officer (give title below) Other (specify below) CEO | | | | |
| (Street) RESTOR | ON VA 20190 | | | | 4. If a | 4. If Amendment, Date of 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 | | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | Perso | on | | | |
| | | Table | I - N | lon-Deriva | tive | Secu | rities | Ac | quire | ed, Di | isposed of | f, or E | Benefic | ciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Y | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year | | e, | 3. Transaction Code (Instr. 8) | | 4. Securities A Disposed Of (| | d 5) | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | (1130.4) |
| Common | mon Stock 03/08/20 | | | 03/08/202 | 22 | 2 | | | F ⁽¹⁾ | | 1,916 | D | \$106 | .86 | 36 222,509.1 | | | D | |
| Common Stock | | | 03/08/2022 | | | | | A | | 160.5503 | A | \$0 |) | 234,50 |)4.1734 | I | | By Key Executive Stock Deferral Plan | |
| Common Stock | | | | | | | | | | | | | | | 114 | ,391 | | I | By Trust |
| | | Tal | ble I | I - Derivati (e.g., pu | | | | | | | posed of, convertib | | | | Owne | t | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exe if an | Deemed cution Date, y nth/Day/Year) | 4. Transa Code 8) | (Instr. | 5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5 | ative rities ired sed | Exp (Mo | iration I | (/Year) | 3 and | int of ities rlying ative ity (Instr | De Se (Ir | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i i illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. These shares were withheld by the Company to satisfy the reporting person's tax obligation associated with previously reported awards of restricted stock units. This share withholding was authorized in the restricted stock award agreement.

Remarks:

/s/ Ramune M. Kligys, Attorney-in-Fact

03/10/2022

Date

** Signature of Reporting Person

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.