SEC Form 4	
------------	--

 \square

FORM 4

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

OMB APPROVAL

OMB Number:	B 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
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* JOHN MIRIAM E				2. Issuer Name and Ticker or Trading Symbol Leidos Holdings, Inc. [LDOS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)																
JOHN MIRIAWI E										Х	Direc	tor		10% O	wner												
(Last)	(Fi	rst) (I	/iddle)	3. Date of Earliest Transaction (Month/Day/Year) 11/16/2023								Office belov	er (give title v)	2	Other (specify below)												
1750 PRESIDENTS STREET				4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line)	Individual or Joint/Group Filing (Check Applicable ne)															
(Street)											X	Form	filed by Or	ne Repo	rting Pers	on											
RESTO	N VA	A 2	0190														Form Perso	filed by Mo on	ore than	One Rep	orting						
(City)	Rule 10	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-Deriva	tive Secu	rities	Acqu	uired,	Dispose	d of, d	or Benefi	cially	y Own	ed														
		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					nd 5) So Bo O		5. Amount of Securities Beneficially Owned Following		Direct I t (I)	7. Nature of Indirect Beneficial Ownership												
						Code	v	Amount	(A) or (D)	or Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)											
Common Stock		11/16/2023			S		7,255	D	\$105.19	58 ⁽¹⁾ 20,436		¹⁾ 20,436		20,436		C											
Common	Stock																							80,142.4452 I		I [By Key Executive Stock Deferral Plan
		Tal	ole II - Derivati (e.g., pu	ve Securi Its, calls, v								Owne	d														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	2. 3. Transaction Date (Month/Day/Year) 3A. Deemed 4. Transact Price of Derivative 8) Derivative 8)		Transaction Code (Instr.	5. Nun of Deriva Securi Acquin (A) or Dispos of (D) (Instr. and 5)	mber 6. Date Exercisable Expiration Date (Month/Day/Year) ities sed 3, 4		ion Date			De Se (In	b. Price of berivative security instr. 5) 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)		Ily D (I	0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)											

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices from \$105.11 to \$105.35 inclusive. The reporting person undertakes to providing to Leidos Holdings, Inc., any security holder of Leidos Holdings, Inc., or the staff of the Securities Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the aforementioned range.

Date

Exercisable

Remarks:

/s/ Ramune M. Kligys by PoA 11/17/2023

<u>of Miriam E. John</u>

Amount or Number

of Shares

Title

Expiration Date

** 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).

Code V

(A) (D)

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.