FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ı	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden										
ı	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

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* SUGAR RONALD D							2. Issuer Name and Ticker or Trading Symbol NORTHROP GRUMMAN CORP /DE/ NOC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 1840 CE	Last) (First) (Middle) 1840 CENTURY PARK EAST						3. Date of Earliest Transaction (Month/Day/Year) 10/29/2009									X Officer (give title X Other (specify below) Chief Executive Officer / Chairman					
(Street) LOS ANGELES CA 90067						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(3	State) 	(Zip) ole I -	Non-Deri	ivativ	e Sec	uriti	ies A	cauir	ed. C	Disposed o	of. or E	Benefic	ially	Owned						
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					ion	2A. Deemed Execution Date,		3.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	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) or (D)	Price	1	Reported Transaction (Instr. 3 and				(Instr. 4)		
Common Stock 10/29/200					009	9			M ⁽¹⁾		13,334	A	\$39.2	18	278,56	3 ⁽²⁾	(2) D				
Common Stock 10/29/200					009	9			S ⁽¹⁾		13,334	D	\$50.17	74	265,22	9(2)	(2) D				
Common Stock															409,000		I		U/A/D		
Common Stock 409,000 I FamilyTrust U/A/D 7/19/01 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)	r) if any		4. Transa	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			rcisable and Date	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		unt 8	8. Price of Derivative Security (Instr. 5)	9. Num derivat Securi Benefi Owned Follow Report Transa (Instr.	tive ties cially I ing ted action(s)	10. Owners Form: Direct (or Indir (I) (Insti	Beneficial Ownership ect (Instr. 4)		
					Code	ode V (A) (D)	(D)	Date Exerc	cisable	Expiration Date	Title	Amou or Numb of Share	ber								
Stock Option (Right-to-	\$39.28	10/29/2009			M	M		13,334	08/15/2002		08/15/2011	Commo	on 13,3	334	\$39.28		0	D			

Explanation of Responses:

- 1. Exercise and sell of shares transaction pursuant to Rule 10b5-1 Trading Plan adopted by reporting person on March 12, 2009.
- 2. Total includes 83,600 unvested Restricted Performance Stock Rights (RPSRs) granted under the 2001 Long-Term Incentive Stock Plan (LTISP) on 2/28/07 with the valuation of performance measurement period ("measurement period") ending on 12/31/09; 81,329 RPSRs granted under the 2001 LTISP on 2/27/08 with measurement period ending on 12/31/10; and 100,300 RPSRs granted under the 2001 LTISP on 2/17/09 with the measurement period ending on 12/31/11. Grants awarded pursuant to Rule 16b-3(d).

/s/ Kathleen M. Salmas, Attorney-in-fact for Ronald D. 10/30/2009 Sugar

** 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.