Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20540	
vvasiiiiiqtoii,	D.C.	20549	

Washington, D	.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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1. Name and Address of Reporting Person*  Perry David T  (Last) (First) (Middle)  2980 FAIRVIEW PARK DRIVE				2. Issuer Name <b>and</b> Ticker or Trading Symbol NORTHROP GRUMMAN CORP /DE/ [NOC]							(Ch	eck all app Direc	tor er (give title		10% C	10% Owner Other (specify	
					3. Date of Earliest Transaction (Month/Day/Year) 03/06/2023								belov	•	below) Global Bus Off		
(Street) FALLS CHURC (City)			2042 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				son		
(City)	(5)		I - Non-Deriva	ative	Secur	ities A	cauir	ed. [	Disposed	l of. o	r Be	neficia	llv Own	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	n (ear)	2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		A) or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	irect   I direct   E	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) (D)	or Pr	rice	Reported Transaction(s) (Instr. 3 and 4)		,, , , , , , , , , , , , , , , , , , ,		(Instr. 4)	
Common	Stock		03/06/202	23			S		3,999	D	\$	469.646	8,71	16.91	D		
Common	Stock		03/06/202	23			S		0.155	D	\$	3469.57	8,71	6.755	D		
Common	Common Stock												48.	1817	I		Held in Northrop Grumman Savings Plan <sup>(1)</sup>
Common Stock												554.	.8341	I	] [] [] []	Held in Northrop Grumman Financial Security and Savings Program <sup>(2)</sup>	
		Ta	ble II - Derivat (e.g., pu				•	,	sposed o	,			y Owne	d			
1. Title of Derivative Conversion Date Security or Exercise (Month/Day/Year) if any		4. Trans	4. 5. Numb		Expiration Date (Month/Day/Year) ed			nd 7.	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported Transact (Instr. 4)	e Ces Fally Dog (I	0. bwnership orm: irect (D) r Indirect ) (Instr. 4	Beneficia Ownersh (Instr. 4)		
			l						- 1		I A	mount		1			1

## **Explanation of Responses:**

1. Held in the Northrop Grumman Savings Plan (the "Plan"), a qualified defined contribution plan, as of 3/6/2023. Share totals with respect to the Plan are based upon unit accounting and therefore may reflect a change in units attributable to an individual though no acquisition or disposition occurred.

(D)

Date

Exercisable

Expiration

2. Held in the Northrop Grumman Financial Security and Savings Program (the "Program"), a qualified defined contribution plan, as of 3/6/2023. Share totals with respect to the Program are based upon unit accounting and therefore may reflect a change in units attributable to an individual though no acquisition or disposition occurred.

## Remarks:

/s/ Jennifer C. McGarey, Attorney-in-Fact

03/08/2023

\*\* Signature of Reporting Person

Number

Shares

Title

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

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.