FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| eck this box if no longer subject to ction 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|---|--|
| obligations may continue. See | |
| Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

OMB APPROVAL OMB Number: 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* MYERS RICHARD B | | | | | | 2. Issuer Name and Ticker or Trading Symbol NORTHROP GRUMMAN CORP /DE/ NOC] | | | | | | | | | eck all app | ationship of Report k all applicable) Director | | 10% | Owner | |
|---|---|--|---|------------|-----------------|--|--------|---|------------------------------|---|-----------------------|---|--------------------------------------|--------------------------|--|---|---|--|---------------------------------------|--|
| (Last) 1840 CE | ` | (First) (Middle) V PARK EAST | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2007 | | | | | | | | | | Officer (give title below) | | Other below | (specify /) | |
| (Street) LOS ANd (City) | 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 | | | | | |
| | | Tabl | e I - No | on-Deriv | ative/ | Sec | uritie | s Ac | quirec | l, Di | sposed o | f, or E | Benefi | ciall | y Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | Exe if ar | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | and Securit Benefic | | es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code | v | Amount | (A) o (D) | r Price | 9 | Transac (Instr. 3 | ction(s) | | | (111341. 4) | | |
| Common | ommon Stock | | | 12/31/2007 | | | | | J ⁽¹⁾ | | 338(1) | A \$ | | 3.64 | 2,765(2) | | | | See footnote. ⁽²⁾ | |
| | | Та | ıble II - | | | | | | | | osed of, convertib | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Dee Execution if any (Month/ | | n Date, Transac | | | | 6. Date Expirat (Month | ion Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Di Si (Ii | Price of erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amoun or Numbe of Shares | | | | | | | |

Explanation of Responses:

- 1. Shares of common stock deferred into stock unit account, including dividends, pursuant to the 1993 Stock Plan for Non-Employee Directors in a transaction exempt pursuant to Rule 16b-3.
- 2. Represents shares of common stock held in a stock unit account pursuant to the 1993 Stock Plan for Non-Employee Directors.

/s/ Kathleen M. Salmas,

Attorney-in-fact for Richard B. 01/02/2008

Myers

** 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.