FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* FARGO THOMAS B | | | | | | | 2. Issuer Name and Ticker or Trading Symbol NORTHROP GRUMMAN CORP /DE/ NOC] | | | | | | | | (Che | ck all app | ationship of Reporti k all applicable) Director Officer (give title | | 10% | Owner r (specify |
|---|---|---------------------------------|--|----------|------------------------------|--|--|------------------|---|-----------------|---|-----------------------|---|--------------------------------------|--|--|--|---------------------------------|--|---------------------------------------|
| (Last) 1840 CE | | (First) (Middle) *URY PARK EAST | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2009 | | | | | | | | | below) | | below) | | |
| (Street) LOS ANGELES CA 90067 (City) (State) (Zip) | | | | | - 4. If | 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 | <i>r</i> 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. Transact Date (Month/Date | | | | | | Exe if a | Deemed cution Date, ny nth/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | | and Securiti 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) c (D) | Price | Transaction(c) | | tion(s) | | | (111341. 4) | |
| Common Stock 03/31/20 | | | | | 2009 | 009 | | J ⁽¹⁾ | | 542(1) | A | \$43 | 3.64 | 1,670(2) | | | | See footnote. ⁽²⁾ | | |
| Common Stock | | | | | | | | | | | | | | | | | 0 | | D | |
| | | | Та | ble II - | | | | | | | | osed of, convertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | on D se (f | 3. Transaction Date (Month/Day/Year) | if any | med on Date, Day/Year) | | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Exercion Da /Day/Y | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (li | Price of erivative ecurity estr. 5) | 9. Number 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-Employees Directors

/s/ Kathleen M. Salmas,

Attorney-in-fact for Thomas B. 04/01/2009

<u>Fargo</u>

** 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.