SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Ch	leck this box if no longer subject to
Se	ction 16. Form 4 or Form 5
ob	ligations may continue. See
Ins	struction 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

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

l	L	
	hours per response:	0.5
	Estimated average burden	

1. Name and Address of Reporting Person* Moraco Anthony J			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Science Applications International Corp</u> [ SAIC]		ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner		
(Last) (First) (Middle) 1710 SAIC DRIVE		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/30/2014	Х	Officer (give title below) Chief Executive C	Other (specify below) Officer	
(Street) MCLEAN (City)	VA (State)	22102 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Filing ( Form filed by One Repor Form filed by More than ( Person	ting Person	

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) if any (Month/Day/			Date, Transaction Code (Instr.		4. Securities A Disposed Of (I	cquired D) (Instr.	(A) or 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr.	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		4)	
Common Stock	07/30/2014		Α		864.625 <sup>(1)</sup>	Α	\$0.0000	164,351.3725 <sup>(2)</sup>	D		
Common Stock	07/30/2014		А	v	24.5718 <sup>(1)</sup>	A	\$0.0000	3,727.8439	Ι	By Key Executive Stock Deferral Plan	
Common Stock	07/30/2014		A	v	7.9884 <sup>(1)</sup>	A	\$0.0000	1,211.9829	I	By Management Stock Compensation Plan	
Common Stock								1,471 <sup>(3)</sup>	I	By SAIC Retirement Plan	

## 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

1. Dividend equivalent rights.

2. Includes 289.2959 shares acquired under the SAIC 2013 Employee Stock Purchase Plan during the period April 1, 2014 through June 30, 2014.

3. During the period of April 1, 2014 through June 30, 2014, the reporting person acquired 18 shares of SAIC common stock under the SAIC Retirement Plan. The balance is pursuant to the reporting person's most recent account statement available.

Nancy A. Walker, Attorney-in-Fact 08/01/2014

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.