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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | | | |
| 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

| 1. Name and Address of Reporting Person* MAHON STEVEN G | | | | | | 2. Issuer Name and Ticker or Trading Symbol Science Applications International Corp [SAIC] | | | | | | | | (Check | all app Direc | licable) | ng Person(s) to 10% (Other | | | |
|--|--|-------|---------------|---|-----------------|---|--|------------------------------|-----------------|--------------------------------|--------------------|--|---|---|--|--------------------------------------|--|---------------------------------------|------------|--|
| (Last) (First) (Middle) 12010 SUNSET HILLS ROAD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/02/2021 | | | | | | | | | X | below | <i>I</i>) | below) ounsel, Secreta | | ` ' | | |
| (Street) RESTON (City) | | | 20190 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv Line) X | , | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acc | uired | , Dis | posed of | , or B | Benefic | cially | Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day) | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (In | | | | | | 5. Amount of Securities Beneficially Owned Follo | | Forn (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | Price | е | Transa | action(s) 3 and 4) | | | (111501.4) | |
| Common Stock 04/02/ | | | | 04/02/2 | .021 | | | | A | | 6,659 | A | \$0.0 | .0000 | | 31,852 | | D | | |
| 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) | erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of Deriv | r osed) r. 3, 4 | 6. Date Expirat (Month | tion Da | Year) Secur Under Deriva | | int of ities rlying ative ity (Instr 4) | Der Sec (Ins | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 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 Number of Shares | r | | | | | | |

Explanation of Responses:

Steven G. Mahon

04/06/2021

** Signature of Reporting Person

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.