FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Wheeler Karen A.					Sc	2. Issuer Name and Ticker or Trading Symbol Science Applications International Corp [SAIC]										5. Relationship of Reporting Person (Check all applicable) Director Officer (give title			0% O	
(Last) (First) (Middle) 12010 SUNSET HILLS ROAD					3. Date of Earliest Transaction (Month/Day/Year) 07/26/2019										X Officer (give title Officer (specify below) EVP, CHRO					
(Street) RESTON			2019	0	4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip) e I -	Non-Deriv	/ative	Sec	uritie	s Ad	cqui	red,	Disp	osed c	of, or I	Benefic	ially Ow	ned				
1. Title of Security (Instr. 3) 2. Transacti			2. Transaction	n 2 (ear) i	Execution Date,		e, 3	3. Transac Code (In 8)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr.				
							7	Code	v	Amo	unt	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		4)				
Common	ommon Stock		07/26/202	07/26/2019				A		5.79	916(1)	A	\$85.07	1,337.3997		I	By Management Stock Compensation Plan			
Common	Common Stock													15,	005	D				
Common	Stock														2,385.732 I			By SAIC Retirement Plan		
		Та	ble	II - Derivat (e.g., p												d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date, y nth/Day/Year)	4. Transa Code 8)	(Instr.	5. Nur of Deriv. Secur Acqu (A) or Dispo of (D) (Instr. and 5	ative rities ired osed	6. Date Exe Expiration (Month/Day		eercisable and n Date ay/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5) Benefic Owne Follow Report Trans (Instr.		rities ficially ed wing rted saction(s)	10. Owner Form: Direct or Indi (I) (Inst	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

 $1. \ Additional \ restricted \ stock \ units \ awarded \ upon \ the \ deemed \ reinvestment \ of \ dividend \ equivalents.$

Steven G. Mahon, Attorney-in-07/30/2019

Fact

** 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.