FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL											
	OMB Number:	3235-0287										
	Estimated average burden											
-	houre por reenonce:	0.5										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					Estimated average burden												3235-0287 Ien 0.5
1. Name and Address of Reporting Person* MAHON STEVEN G					2. Issuer Name and Ticker or Trading Symbol Science Applications International Corp [SAIC]							(Ch	neck all app Dired	olicable) ctor er (give title		Owner (specify	
(Last) (First) (Middle) 1710 SAIC DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2017									•	Counsel, Secre	tary	
(Street) MCLEAN VA 22102 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	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 - Nor	n-Deriv	ative S	ecuriti	es Ac	quired,	Dis	posed o	f, or l	Bene	ficial	lly Own	ed		
1. Title of Security (Instr. 3) 2. Transa Date (Month/E				action 2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Disposed Code (Instr. 5)			ities Acquired (A) o d Of (D) (Instr. 3, 4 a			Securi Benefi Owned	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									v	Amount	(A (D) or))	Price		action(s) 3 and 4)		(Instr. 4)
Common Stock 04/01						/2017		F		208	D \$74		\$74.	4 4,622		D	
		Та	ıble II - C							sed of, onvertib				Owned			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date Courity or Exercise (Month/Day/Year) if any		Date,	Transaction of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		str. 3	3. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Date Exercisable

Expiration Date

Explanation of Responses:

Steven G. Mahon

Title

04/03/2017

** Signature of Reporting Person

or Number

of Shares

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).

Code

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.

(A) (D)