FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 0.5 hours per response:

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*  Mendoza Marie						2. Issuer Name and Ticker or Trading Symbol KRATOS DEFENSE & SECURITY SOLUTIONS, INC. [ KTOS ]									eck all appli Directo	cable) or (give title	g Pers	Person(s) to Issuer  10% Owner Other (specify below)	
(Last) (First) (Middle) 10680 TREENA STREET, SUITE 600						3. Date of Earliest Transaction (Month/Day/Year) 06/04/2024										SVP & General Counsel			
(Street)					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable le)  Form filed by One Reporting Person						
SAN DIEGO CA 92131																Form filed by More than One Reporting Person			
(City) (State) (Zip)					Rı	Rule 10b5-1(c) Transaction Indication													
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Da			Code (Instr.		n Dispos	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic	es Forrially (D) (Following (I) (II)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Cod	v	Amoun	t (	(A) or (D)	Price	Transac (Instr. 3	tion(s)			msu. 4)
Common Stock 06/04/					4/2024	1			M	┸	1,00	0(2)	A	\$0	66,	543(4)		D	
Common Stock 06/04/					4/2024	1			F		497	(3)	D	\$21.	1 66,	046(4)		D	
		Т									osed o				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction		5. Number 6		Exerci on Dai Day/Ye		r) Amou Secui Unde Deriv		. Title and mount of ecurities inderlying lerivative Security nstr. 3 and 4)		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title		Amount or Number of Shares					
Restricted Stock Units	(1)	06/04/2024			M			1,000	(2)		(2)	Comr		1,000	\$0	1,000		D	

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit (RSU) represents a contingent right to receive one share of Issuer's common stock.
- 2. RSUs were granted and previously reported on a Form 4 filed June 5, 2020, where 5,000 RSUs vest ratably on each of the first five anniversaries of the June 4, 2020 date of grant
- 3. Shares withheld in a net transaction to satisfy the tax liability, in accordance with Issuer's trading policies, in connection with shares vested as reported in this Form 4.
- 4. Includes 1,547 shares purchased through Issuer's Employee Stock Purchase Plan and approximately 14,450 shares held through Issuer's 401(k).

Marie C. Mendoza, by Eva 06/05/2024 Yee, Attorney-In-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.