FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

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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* Fendley Steven S. | | | | | 2. Issuer Name and Ticker or Trading Symbol KRATOS DEFENSE & SECURITY SOLUTIONS, INC. [KTOS] | | | | | | | | | | k all app Direc | , | ng Pe | rson(s) to Is 10% O Other (| wner |
|---|---|--|---------------------------------|------------------------------|--|--|--|----------|---|-----|--|---|--|-----------------------|--|---|--------------------|-----------------------------------|------|
| (Last) 10680 T | (Fi REENA ST | rst) (I REET, SUITE 6 | Middle) | | | B. Date of Earliest Transaction (Month/Day/Year) 07/26/2021 | | | | | | | Λ | belov I | v) President, | US I | below) Division | | |
| (Street) SAN DII (City) | | |)2131 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | Form | r Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Benef | icially | / Own | ed | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date, | | Date, | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of (5) | | | | | 5. Amo Securi Benefi Owned | ties cially I Following | Forr (D) (| wnership m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount (| | or Pi | rice | Transa | action(s) 3 and 4) | | | (Instr. 4) | | |
| Common Stock 07/2 | | | 07/26/2 | 2021 | | S ⁽¹⁾ | | 7,000(1) | 1 | \$ | 27.12 | 32 | 20,883 | | D | | | | |
| | | Tal | | | | | | | | | osed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Exercise (Month/Day/Year) if any (Month/Day/Year) rivative | | 4. Transa Code (8) | Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share | | Dei Ser (Institution in the ser i | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

1. This transaction was effected pursuant to a 10b5-1 trading plan adopted by the reporting person.

Steven S. Fendley, by Eva Yee, Attorney-In-Fact

07/28/2021

** 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.