FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
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

Name and Address of Reporting Person TOWNSEND FRANCES F			2. Date of Event Statement (Month 11/28/2022		3. Issuer Name and Ticker or Trading Symbol Leonardo DRS, Inc. [DRS]						
(Last) C/O LEONARDO 2345 CRYSTAL I		(Middle)				Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) ARLINGTON	VA			Other (specify	below)	Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				2. Amoun Owned (Ir	t of Securities Beneficially nstr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			Expirat	2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Securities Underly Security (Instr. 4)		4. Convers or Exerc Price of	ise or Indirect (I)	6. Nature of Indirect Beneficial D) Ownership (Instr. 5)	
			Date Exercis	Expirate Date	ion Title	Amount or De Number of Se		Derivativ Security			

Explanation of Responses:

Remarks:

See Exhibit 24 - Power of Attorney. EXHIBIT LIST: EX-24 Townsend Frances F.

No securities are beneficially owned.

/s/ Katherine Krebel, Attorney-in-Fact 11/28/2022

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).

LIMITED POWER OF ATTORNEY FOR SECTION 16 REPORTING OBLIGATIONS

Know all by these presents, that the undersigned hereby constitutes and appoints Katherine Krebel the undersigned's true and lawful attorney—in the execute for and on behalf of the undersigned, in the undersigned's capacity as an officer or director or both of Leonardo DRS, Inc. (the do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any sucl seek or obtain, as the undersigned's representative and on the undersigned's behalf, information on transactions in the Company's securify take any other action in connection with the foregoing which, in the opinion of such attorney—in—fact, may be of benefit to, in the best The undersigned hereby grants the attorney—in—fact full power and authority to do and perform any and every act and thing whatsoever required, The undersigned acknowledges that the foregoing attorney—in—fact, in serving in such capacity at the request and on the behalf of the undersign This Limited Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, 5 and 144

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 23rd day of February, 2021.

By: /s/ Frances F. Townsend Name: Frances F. Townsend