SEC Form 4	
FORM	4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							

Estimated average burden hours per response: 0.5

intended to satis defense conditio 1(c). See Instruc									
	ss of Reporting Pers	on [*]	2. Issuer Name and Ticker or Trading Symbol PARSONS CORP [PSN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WAJSGRAS DAVID C				1	Director	10% Owner			
(Last) PARSONS COF		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025		Officer (give title below)	Other (specify below)			
14291 PARK MEADOW DR., #100			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	ividual or Joint/Group Filing (Check Applicable				
(Street) CHANTILLY	VA	20151			Form filed by One Rep	0			
	¥2 ¥	20131			Form filed by More that Person	n One Reporting			
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	ution Date, Transaction		Transaction Disposed Of (D) (Instr. 3, 4 and Code (Instr. 5)				Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(
Common Stock	01/02/2025		Α		320(1)	A	\$ <mark>0</mark>	32,124 ⁽²⁾	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1			(e.g., pt	113, 00	ans, 1	varie	anto,	options, t	,onvertib	10 30	cunties	·)			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		5. Number of e (Instr. e (Instr. e (A) or Disposed of (D) (Instr. 3, 4 and 5)		of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Date (Month/Day/Year)		e and unt of rities rlying ative rity (Instr. 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents an award of fully vested restricted stock units. Vested shares will be delivered pursuant to the terms and conditions set forth in the applicable grant notice for such restricted stock units, subject to any deferral election made by the insider.

2. The reporting person's previous Forms 4 erroneously understated the number of shares of Common Stock beneficially owned. The amount in Column 5 of Table I has been corrected in this Form 4.

<u>/s/ Michael R. Kolloway, as</u>	01/06/2025
attorney-in-fact	01/00/2020
** 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.