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).
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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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

### 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: 3235-028								
Estimated average b	urden							
hours per response:	0.5							

1. Name and Address of Reporting Person*	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	[ ]	Director 10% Owner				
(Last) (First) (Middle) PARSONS CORPORATION	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024	Officer (give title Other (specify below) below)				
14291 PARK MEADOW DR., #100	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CHANTILLY VA 20151		Form filed by One Reporting Person Form filed by More than One Reporting Person				
(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)	3. Transa Code ( 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	10/01/2024		A		326(1)	Α	\$0.00	27,264	D	

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

Derivative Security (Instr. 3)         Conversion or Exercise (Month/Day/Year)         Date (Month/Day/Year)         Execution Date, if any (Month/Day/Year)         Transaction Code (Instr. 8)         of Derivative Securities         Expiration Date (Month/Day/Year)         Amount of Securities         Derivative Securities         Derivative Securities         Ownership Securities         of I           Derivative         Price of Derivative         Ownership (Instr. 3)         Transaction (Month/Day/Year)         of Securities         Expiration Date (Month/Day/Year)         Amount of Securities         Derivative Securities         Ownership Securities         of Securities															
Derivative Security	Conversion or Exercise Price of	Date	Execution Date, if any	Transa Code (		of Deriv Secu Acqu (A) o Dispe of (D	vative urities uired r osed ) r. 3, 4	Expiration Da	ate	Amou Secu Unde Deriv	unt of rities rlying ative rity (Instr.	Derivative Security	derivative Securities Beneficially	Ownership Form: Direct (D)	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.

# /s/ Michael R. Kolloway, as attorney-in-fact

<u>10/03/2024</u>

\*\* 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.