1. Name and Address of Reporting Person  
Kolloway Michael Richard  

   (Last)  
   (First)  
   (Middle)  

PARSONS CORPORATION  
5875 TRINITY PARKWAY #300  

(City)  

2. Issuer Name and Ticker or Trading Symbol  
PARSONS CORP [ PSN ]  

3. Date of Earliest Transaction (Month/Day/Year)  
12/31/2019  

4. If Amendment, Date of Original Filed (Month/Day/Year)  
01/03/2020  

5. Relationship of Reporting Person(s) to Issuer  
   Director  
   X 10% Owner  
   Other (specify below)  

See Remarks  

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

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>12/31/2019</td>
<td></td>
<td>F</td>
<td>1,081 D</td>
<td>1,336 D</td>
<td>D</td>
<td>V</td>
</tr>
</tbody>
</table>

Explaination of Responses:  

Remarks:  
Chief Legal Officer and Secretary. This amendment is being filed to reflect the withholding of shares to cover taxes on January 3, 2020, which was omitted from the Form 4 filed on January 3, 2020. The number of shares reported in Column 5 reflects the Reporting Person's direct holdings following the share withholding.  

/s/ Michael R. Kolloway  
04/30/2020  
** 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).  
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.