FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OIVIB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | urden | | | | | | | | |

hours per response:

0.5

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

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

| 1. Name and Address of Reporting Person* WHORLEY JOHN F JR | | | | | 2. Issuer Name and Ticker or Trading Symbol NAVIENT CORP [NAVI] | | | | | | | | Relationship of the control of the c | able) | g Perso | n(s) to Issu 10% Ow Other (s | ner | |
|---|---|--|---|----------------------------------|--|---|------------|----------|--|---|--|-----------------------|--|---|---------------------|--|--|--|
| | | | | 02 | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2018 | | | | | | | EVP & Group President | | | | | | |
| (Street) | IGTON I | DE 19801 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. I Lin | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (| State) | (Zip) | n-Der | ivativ | , S | | ities Ac | auired | Die | enosed o | of or Re | neficial | v Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | saction | ction 2A. Deemed Execution Date, | | aquired, Disposed of, or Benefic 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 1) | | | d (A) or | 5. Amour Securitie Beneficia Owned F | Form (D) o | | n: Direct I or Indirect I nstr. 4) (| 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transacti (Instr. 3 a | ction(s) | | 1 | (Instr. 4) | | | |
| Common Stock 02/13/2 | | | | 13/201 | 2018 | | M | | 174,257 A | | \$9.1 | 3 439,37 | 439,377.9731 | | D | | | |
| Common Stock 02/13/2 | | | 13/201 | 2018 | | F | | 135,53 | 9 D | \$13.6 | 303,838.9731 | | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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) | | 4. Transaction Code (Instr. 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title an of Securit Underlyin Derivative (Instr. 3 an | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | ion(s) | | |
| Stock Option (Right to Buy) | \$9.18 | 02/13/2018 | | | М | | | 174,257 | (1) | | 02/03/2021 | Common Stock | 174,257 | \$0 | 87,12 | 29 | D | |

Explanation of Responses:

1. Grant of net-settled stock options under the Navient Corporation 2014 Omnibus Incentive Plan. These options have vested or will vest in one-third increments on each of February 3, 2017, February 3, 2018, and February 3, 2019.

/s/ Kurt T. Slawson (POA) for ** Signature of Reporting Person

02/14/2018

John F. Whorley, Jr.

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.