FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* <u>Lawson Michael A</u>	2. Date of Eveni Requiring State (Month/Day/Yea 08/02/2021	ement	3. Issuer Name and Ticker of NAVIENT CORP		,				
(Last) (First) (Middle) 123 JUSTISON ST.			Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
SUITE 300	_		X Director Officer (give title below)	10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting			
(Street) WILMINGTON DE 19801	_						Person	by More than One Person	
(City) (State) (Zip)									
	Table I - Non-De	erivativ	e Securities Benefic	ially O	wned				
1. Title of Security (Instr. 4)						4. Nature of Indirect Beneficial Ownership (Instr. 5)			
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr.)	Form: [(D) or li	Direct ndirect				
Title of Security (Instr. 4) No Securities Owned		В	seneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)				
No Securities Owned		vative:	eneficially Owned (Instr.)	Form: I (D) or II (I) (Inst I	Direct ndirect r. 5)	Own			
No Securities Owned		vative warran	eneficially Owned (Instr.) 0 Securities Beneficia	Form: I (D) or II (I) (Inst IIy Owr ble sec	Direct ndirect r. 5)) sion			

Explanation of Responses:

Remarks:

Exhibit 24 - Power of Attorney

/s/ Kurt T. Slawson (POA) for Michael A. Lawson

08/04/2021

** 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 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).

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.