Edgar Filing: SLM CORP - Form 4

SLM CORF)										
Form 4											
March 03, 2	2016										
FORM	ΠΔ								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box				<i>o</i> ,					Expires:	January 31,	
if no lon subject t	STATE	MENT O	F CHAN	IGES IN BENEFICIAL OWN				NERSHIP OF	Estimated average		
Section 16. SECURI				RITIES				burden hours per			
	Form 4 or							response	0.5		
Form 5 obligation	^						-	ge Act of 1934,			
may cor				•	•	- ·		f 1935 or Section	1		
See Inst		30(h)	of the Ir	vestment	Compan	y Act	t of 19	40			
1(b).											
(Print or Type	Responses)										
(I mit of Type	responses)										
1. Name and	Address of Reporting	Person *	2 Issue	r Name and	Ticker or	Tradir	σ	5. Relationship of	Reporting Pers	on(s) to	
Lutz Laurent Charles Symbol				ssuer Name and Ticker or Trading ool I CORP [SLM]				Issuer			
				B. Date of Earliest Transaction				(Check all applicable)			
(Last)	(First)	(Middle)			ransaction			Director	10%	Owner	
				Month/Day/Year) 3/01/2016				Difector X Officer (give	title Other (specify		
200 00111		2	03/01/2	.010				below)	below)		
								EVP, G	C and Secretar	.у	
(Street) 4. If Ame			mendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
Filed(Mo				(Month/Day/Year)							
NEWADY	DE 10712							Form filed by M			
NEWARK	, DE 19715							Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securi	ties Ac	quired, Disposed of,	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securit			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)		n Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities	Ownership	Indirect	
(Instr. 3)		any (Month/D	av/Year)					Beneficially Owned Following	Form: Direct Benefic (D) or Owners	Ownership	
		(ivionul/D	ay/icai)	(11301.0)		<i>(</i>))		Reported	Indirect (I)	(Instr. 4)	
						(A) or		Transaction(s)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common					31 775		\$				
Common Stock	03/01/2016			F	31,775 (1)	D	» 6.06	955,984.4601	D		
STOCK							0.00				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: SLM CORP - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
r of the test of the test	Director	10% Owner	Officer	Other				
Lutz Laurent Charles 300 CONTINENTAL DRIVE NEWARK, DE 19713			EVP, GC and Secretary					
Signatures								
/s/ Nicolas Jafarieh (POA) for La C. Lutz	urent	03/03/2016						
**Signature of Reporting Person		Date						

Explanation of Responses:

* 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).

(1) These shares were withheld by the Company to satisfy Mr. Lutz's tax withholding obligation.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.