## Edgar Filing: SLM CORP - Form 4

CI M CODD

| Form 4   |   |        |  |   |   |                |   |  |   |           |  |
|--|---|--------|--|---|---|----------------|---|--|---|-----------|--|
| December 0'  |   |        |  |   |   |                |   |  | OMB AF  | PROVAL    |  |
| FORM   | UNITED  | STATES |  |   | AND EX<br>, D.C. 20   |                | NGE CO  | OMMISSION  | OMB<br>Number:  | 3235-0287 |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5   |   |        |  | SECUI                                       | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |                |   |  |   |           |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |   |        |  |   |   |                |   |  |   |           |  |
| (Print or Type l   | Responses)  |        |  |   |   |                |   |  |   |           |  |
| 1. Name and Address of Reporting Person <u>*</u><br>GOODE EARL A   |   |        | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>SLM CORP [SLM]  |   |   |                |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                          |   |           |  |
| (Last) (First) (Middle)<br>300 CONTINENTAL DRIVE<br>(Street)   |   |        | <ul> <li>3. Date of Earliest Transaction<br/>(Month/Day/Year)</li> <li>12/05/2016</li> <li>4. If Amendment, Date Original<br/>Filed(Month/Day/Year)</li> </ul> |   |   |                |   | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)                           |   |           |  |
|  |   |        |  |   |   |                |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_Form filed by One Reporting Person |   |           |  |
| NEWARK,  | DE 19713  |        |  |   |   |                | ]   | Form filed by Mo<br>Person   | ore than One Re   | porting   |  |
| (City)   | (State)   | (Zip)  | Tabl   | le I - Non-l                                | Derivative  | Secur          | ities Acqu  | ired, Disposed of,   | or Beneficial   | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | curity(Month/Day/Year)Execution Date, ifTransacstr. 3)anyCode |        | Transactio   | 4. Securiti<br>ordr Dispose<br>(Instr. 3, 4 | ed of (<br>4 and 5<br>(A)   | (D)            | <ul> <li>5. Amount of<br/>Securities</li> <li>Beneficially</li> <li>Owned</li> <li>Following</li> <li>Reported</li> <li>Transaction(s)</li> </ul> | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4)                             | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |           |  |
| Common<br>Stock  | 12/05/2016  |        |  | Code V<br>M                                 | Amount<br>13,994<br>(1)   | or<br>(D)<br>A | Price<br>\$<br>5.7343   | (Instr. 3 and 4)<br>87,078   | D   |           |  |
| Common<br>Stock  | 12/05/2016  |        |  | F   | 7,585<br>(2)  | D              | \$ 10.58  | 79,493   | D   |           |  |

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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | <ul> <li>5. Number of</li> <li>5. Number of</li> <li>5. Number of</li> <li>6. Securities</li> <li>8) Acquired (A)</li> <li>or Disposed of</li> <li>(D)</li> <li>(Instr. 3, 4,</li> <li>and 5)</li> </ul> |              | ivative Expiration Date<br>urities (Month/Day/Year)<br>quired (A)<br>Disposed of<br>str. 3, 4, |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|---|---|---|---|--|--|--------------|--|--------------------|---|-------------------------------------|
|   |   |   |   | Code V                                 | (A)  | (D)          | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Stock<br>Options<br>(Right to<br>Buy)               | \$ 5.7343   | 12/05/2016                              |   | М                                      | 1  | 3,994<br>(1) | 05/24/2012   | 02/03/2017         | Common<br>Stock   | 13,994                              |

## **Reporting Owners**

| Reporting Owner Name / Address                            | Relationships |            |         |       |  |  |  |  |
|---|---------------|------------|---------|-------|--|--|--|--|
| I B   | Director      | 10% Owner  | Officer | Other |  |  |  |  |
| GOODE EARL A<br>300 CONTINENTAL DRIVE<br>NEWARK, DE 19713 | Х             |            |         |       |  |  |  |  |
| Signatures  |               |            |         |       |  |  |  |  |
| /s/ Nicolas Jafarieh (POA) for l<br>Goode                 | Earl A.       | 12/07/2016 |         |       |  |  |  |  |
| <b>**</b> Signature of Reporting Person                   | 1             |            | 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) Stock options exercised by the reporting person in advance of pending expiration of options.
- (2) Represents shares withheld by the Company to satisfy the option price upon the exercise of the option.

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.