

1. Name and Address of Reporting Person  
McCormack, June M.  
11600 Sallie Mae Drive  
Reston, VA 20193
2. Issuer Name and Ticker or Trading Symbol  
SLM Corporation (SLM)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year  
8/2002
5. If Amendment, Date of Original (Month/Day/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
( ) Director ( ) 10% Owner  
(X) Officer (give title below) ( ) Other (specify below)  
Executive Vice President
7. Individual or Joint/Group Filing (Check Applicable Line)  
(X) Form filed by One Reporting Person  
( ) Form filed by More than One Reporting Person

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

1. Title of Security	2. Trans- action Date (Month/ Day/ Year)	3. Trans- action Code Code V	4. Securities Acquired (A) or Disposed of (D) Amount A/D Price	5. Amount of Securities Beneficially Owned at End of Month	6. Owner- ship Form: Direct (D) or Indirect (I)	7. Nature of In- direct Bene- ficial Owner- ship
Common Stock	06/30/2002	F V	-11842 D \$84.7800	74034	D	

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

1. Title of Derivative Security	2. Deriv- ative Security	3. Transac- tion Date (Month/ Day/Year)	4. Transac- tion Code Code V	5. Number of Derivative Securities Acquired(A) Disposed(D)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities Amount or Number of Shares	8. Price of Derivative at End of Month	9. Number of Deriv- ative Secur- ities Benefi- cially Owned	10. Owner- ship Form of Deriv- ative Secur- ity: Direct (D) or Indirect (I)	11. Nature of In- direct Bene- ficial Owner- ship
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Explanation of Responses:

SIGNATURE OF REPORTING PERSON  
/s/Mary F. Eure (POA)

DATE  
08/13/2002