FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* LORD ALBERT L					2. Issuer Name and Ticker or Trading Symbol SLM CORP [SLM]										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
					.										X						
(Last) (First) (Middle) 300 CONTINENTAL DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2013									X	belov			be	Other (specify below)			
300 COI	11111111111	L DIGVE																			
(Street)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
NEWARK DE 19713															X Form filed by One Reporting Person						
(City)	(St	ate) (Zip)												Form filed by More than One Reporting Person						
		Tab	e I -	Non-Deriv	ativ	e Sec	uritie	s A	cquii	red,	Dispos	sed	of, or	Benefic	ially	Owne	ed				
Date		2. Transaction Date (Month/Day/Y		2A. Deemed Execution Date, if any (Month/Day/Year)		·, -	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar 5)			Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
						ſ	Code V		Amount		(A) or (D)	Price	Tran	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock		03/01/201	.3				S ⁽¹⁾		20,00	00	D	\$18.83	1,018,805.481 D								
Common	Stock														30,093.612 ⁽²⁾ I			By 401(k)			
Common	Stock														2,100 I			By Immediate Family			
Common	nmon Stock													144	144,353.6046 ⁽³⁾		I		By Supplemental Thrift & Savings Plan		
		Ta	ıble	II - Derivat (e.g., pı												wned					
Derivative Conversion D		sion Date Excise (Month/Day/Year) Excise (Month/Day/Year)		f any Cc Month/Day/Year) 8)		saction (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiratio (Month/D				Amou Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		ber of ive ies cially ing ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
							(4)	(D)	Date	e vrojeah	Expiration		Title	Amount or Number of							

Explanation of Responses:

- 1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan entered into by the reporting person on February 14, 2013, and effective on February 19, 2013.
- 2. Between January 25, 2013 and February 28, 2013, Mr. Lord acquired 1,944.1624 share equivalents of SLM common stock under the SLM 401(k) Plan. The information in this report is based on the individual's actual account balance as of February 28, 2013.
- 3. Between January 25, 2013 and February 28, 2013, Mr. Lord acquired 2,465.9899 share equivalents of SLM common stock under the SLM Supplemental Thrift & Savings Plan. The information in this report is based on the individual's actual account balance as of February 28, 2013.

/s/ La Fleur C. Browne (POA) for Albert L. Lord

03/04/2013

** 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 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.