FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* McGarry Steven | | | | | | | 2. Issuer Name and Ticker or Trading Symbol SLM CORP [SLM] | | | | | | | | ck all app Dired | olicable) ctor | g Person(s) to Is | Owner | |
|--|---|--|---|---------|--|---|---|--|--|---|---|---|--|---------|---|---|---|--|--|
| (Last) (First) (Middle) 300 CONTINENTAL DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/04/2017 | | | | | | | | | belov | , | below | | |
| (Street) NEWARK DE 19713 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Forn Forn | al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution Date, | | | 3. Transa Code (1 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | | | 5. Amo Securi Benefi Owned | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Pri | | rice | Transa | ction(s) 3 and 4) | | (111511.4) | |
| Common Stock 02/04/2 | | | | | | | 2017 | | | | 4,347(1 | 4,347 ⁽¹⁾ D \$1 | | \$12.04 | 356,887.3371 | | D | | |
| Common Stock | | | | | | | | | | | | | | | 2,141.858 ⁽²⁾ | | I | 401(k) Savings Plan | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | n Date, | | ensaction of | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of Title Shares | | r. 3 | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. On February 4, 2014, Mr. McGarry was awarded 13,692 Restricted Stock Units ("RSUs") representing rights to receive shares of common stock of SLM Corporation (the "Company") that were subsequently adjusted in the spin-off of Navient to reflect 38,404 RSUs outstanding and an additional 80 RSUs attributable to dividends. On February 4, 2017, the restrictions lapsed on 12,802 RSUs and 4,347 shares of the Company common stock were withheld to satisfy Mr. McGarry's tax withholding obligations.
- $2. \ Represents the number of units held in a unitized stock fund in the Sallie \ Mae \ 401(k) \ Savings \ Plan \ as \ of \ January \ 23, \ 2017 \ Advisory \ Plan \ Pla$

/s/ Nicolas Jafarieh (POA) for Steven J. McGarry 02/07/2017

** 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.