FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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| Mochington | $D \subset \mathcal{A}$ | 0540 |        |          |  |

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|   | OMB Number:       | 3235-0287 |  |  |  |  |  |  |  |  |  |
|   | Estimated average | e burden  |  |  |  |  |  |  |  |  |  |

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(0). 5  | ee instruction i   | 0.      |           |   |   |                                      |                                 |  |            |         |   |                      |   |   |   |   |           |   |           |
|--|--|---------|-----------|---|---|--------------------------------------|---------------------------------|--|------------|---------|---|----------------------|---|---|---|---|-----------|---|-----------|
| Name and Address of Reporting Person*     Strong Robert S.                       |  |         |           |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol SLM Corp [ SLM ] |                                      |                                 |  |            |         |   |                      | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |   |   |           |   |           |
| Strong Robert S.   |  |         |           |   |   |                                      |                                 |  |            |         | 1   | Director             |   |   | 10% O\                                  | wner  |           |   |           |
| (Last)   | (First) (Middle)  CONTINENTAL DRIVE  |         |           | 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024 |   |                                      |                                 |  |            |         |   | Office<br>below      | er (give title  |   | Other (sbelow)                          | specify   |           |   |           |
|  |  |         |           | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |   |                                      |                                 |  |            |         |   | 6 15                 | 6. Individual or Joint/Group Filing (Check Applicable                   |   |   |   |           |   |           |
| (044)  |  |         |           |   | 4. 11 /   | Amena                                | ment,                           | Date 0   | Oligili    | ai File | u (WOIIII/Da  | y/ rear              | ,   | Line  |   | John Grou   | Priiiig   | (Cileck A                               | pplicable |
| (Street)   | V DI   |         | 0712      |   |   |                                      |                                 |  |            |         |   |                      |   | 1   | / Form                                  | filed by On   | e Repo    | orting Pers                             | on        |
| NEWAR  | K DE   | 5 1     | 9713      |   |   |                                      |                                 |  |            |         |   |                      |   |   | <br>Form                                | filed by Mo   | re than   | One Repo                                | orting    |
| -  |  |         |           |   |   |                                      |                                 |  |            |         |   |                      |   |   | Perso                                   | on  |           |   |           |
| (City)   | (Sta   | ate) (Z | Zip)      |   |   |                                      |                                 |  |            |         |   |                      |   |   |   |   |           |   |           |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |         |           |   |   |                                      |                                 |  |            |         |   |                      |   |   |   |   |           |   |           |
|  |  | Table   | 1 - 110   | ii-Deriva   | uve s   | ecu                                  | lues                            | АСЧ  | uirea      | , DIS   | poseu oi  | , or i               | Serie   | ilicia  | lly Own                                 | eu  |           |   |           |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day                    |  |         |           | Execution Date,   |   | 3.<br>Transaction Code (Instr. 3, 5) |                                 |  |            | Benefic | es  | Form                 | : Direct<br>Indirect  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |   |   |           |   |           |
|  |  |         |           |   |   |                                      |                                 |  | Code       | v       | Amount (A) or (D)   |                      | rice  |   | ported<br>insaction(s)<br>str. 3 and 4) |   |           | (Instr. 4)                              |           |
| Common Stock 06/18/2   |  |         |           |   | 2024  |                                      |                                 |  | A          |         | 7,069(1)  | 069 <sup>(1)</sup> A |   | <b>\$0</b>  | 110,093.4683(2)                         |   |           | D                                       |           |
|  |  | Tal     | ـ اا ماد  | Dorivati  | νο Sc   | curit                                | tioe /                          | /can   | ired       | Dien    | osed of,  | or Be                | nofi  | cially  | , Owner                                 | 4   | ,         |   |           |
|  |  | Idi     | JIC 11 -  |   |   |                                      |                                 |  |            |         | convertib   |                      |   |   | OWITE                                   | 4   |           |   |           |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any |         | ion Date, |   | Transaction of Code (Instr. Derivative                              |                                      | ative<br>rities<br>ired<br>osed | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |            |         | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |                      | 1 5   | B. Price of<br>Derivative<br>Security<br>Instr. 5)  |   | Ownersh<br>Form:<br>Direct (D<br>or Indirect<br>(I) (Instr. | Ownership | Beneficial<br>Ownership<br>t (Instr. 4) |           |
|  |  |         | Code      | v   | (Δ)   | (D)                                  | Date<br>Exercis                 | sahle  | Expiration | Title   | Amo<br>or<br>Num<br>of<br>Shar  | ber                  |   |   |   |   |           |   |           |

## **Explanation of Responses:**

- 1. The reporting person received shares of Restricted Common Stock, issued pursuant to the terms of the SLM Corporation 2021 Omnibus Incentive Plan 2024 Independent Director Restricted Stock Agreement (the "2024 Agreement") in partial payment of the annual retainer to independent directors. The Restricted Common Stock award is subject to vesting upon the terms set forth in the 2024
- 2. Includes Dividend Equivalent Units issued in connection with Restricted Common Stock held by the reporting person.

## Remarks:

/s/ Jeffrey Lipschutz (POA) for Robert S. Strong

\*\* Signature of Reporting Person Date

06/21/2024

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.