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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting <u>Hisey David C</u> | | 2. Issuer Name and Ticker or Trading Symbol <u>FEDERAL NATIONAL MORTGAGE</u> <u>ASSOCIATION FANNIE MAE</u> [FNM] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) |
|---|------------------|---|--|
| (Last) (First) 3900 WISCONSIN AVENUE C/O FANNIE MAE | (Middle) , NW | 3. Date of Earliest Transaction (Month/Day/Year) 04/13/2009 | EVP & Deputy CFO |
| (Street) WASHINGTON DC (City) (State) | 20016 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. 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 (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 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 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---|---|---|---------------|-------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 04/13/2009 | | F | | 1,610(1) | D | \$0.8 | 69,463 | D | |
| Common Stock | | | | | | | | 307.76 | I | By ESOP |
| Common Stock | | | | | | | | 305 | Ι | By Reporting Person As Ugma Custodian For Daughter 1 |
| Common Stock | | | | | | | | 305 | I | By Reporting Person As Ugma Custodian For Daughter 2 |

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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | of E | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | | Expiration Date (Month/Day/Year) cquired) or sposed (D) str. 3, 4 | | | Expiration Date | | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | Derivative Security | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | derivative Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|---|---|------|-----------|--|--------------------|--|--|--|-----------------|--|---|---|---|------------------------|--|--|--|--|
| | | | | Code | v | | ,) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | | | | | |

Explanation of Responses:

1. These shares were withheld by the Issuer to pay withholding taxes due upon the vesting of restricted shares.

/s/ David C. Hisey

** Signature of Reporting Person

<u>04/15/2009</u> 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.