\square

1. Name

(Street)

(City)

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). | |

(State)

(Zip)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Form filed by More than One Reporting

Person

| 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 [*] SITES JOHN C JR | 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) X Director 10% Owner Officer (give title Other (specify |
| Last) (First) (Middle) 900 WISCONSIN AVENUE, NW | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2008 | below) below) |
| (Street) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) |
| WASHINGTON DC 20016 | | X Form filed by One Reporting Person |

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

| Table 1- Non-Derivative Securities Acquired, Disposed of, or Denencially 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) | | | | | 5. Amount of Securities Beneficially Owned 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) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (1150.4) | | |
| Common Stock | 05/07/2008 | | Р | | 5,000 | A | \$29.3 | 10,500 | D | | | |
| Common Stock | 05/07/2008 | | Р | | 2,100 | A | \$29.18 | 2,100 | I | By Reporting Person as custodian for daughter | | |
| Common Stock | 05/07/2008 | | Р | | 2,100 | A | \$29.15 | 2,100 | I | By Reporting Person as custodian for son | | |

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) | Transaction Code (Instr.) 8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed . 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Expiration Date Amoun Month/Day/Year) Securi Underl Deriva Securi | | | Expiration Date Amount | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|-------------------------------------|---|--|---|--|--------------------|---|--|--|------------------------|--|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

Remarks:

/s/ John C. Sites, Jr.

05/08/2008

Date

** Signature of Reporting Person

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.