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FEDERAL NATIONAL MORTGAGE ASSOCIATION FANNIE MAE Form 3 September 25, 2008 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB 3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> LASKAWY PHILIP A		³ 3. Issuer Name and Ticker or Trading Symbol FEDERAL NATIONAL MORTGAGE ASSOCIATION FANNIE MAE [FNM]				
(Middle)	09/10/2008	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O FANNIE MAE, 3900 WISCONSIN AVENUE, NW		(Check	(Check all applicable)			
(Street) WASHINGTON, DC 20016		Officer 10% Owner Officer Other (give title below) (specify below)		•	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 	
(Zip)	Table I - I	Non-Derivat	ive Securiti	es Be	neficially Owned	
			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•	
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ns who resplation conta ation conta	oond to the collection of ined in this form are not nd unless the form displ	t Si	EC 1473 (7-02)		
	A (Middle) 3900 E, NW 20016 (Zip) (Zip) atly Owned ate line for ea ns who response	Statement A (Month/Day/Year) 09/16/2008 (Middle) 3900 E, NW Â 20016 (Zip) Table I - N 2. Amount o Beneficially (Instr. 4) ate line for each class of securities benefic ns who respond to the collection of pation contained in this form are not	Statement FEDERAL P A (Month/Day/Year) 09/16/2008 4. Relationshi 09/16/2008 4. Relationshi 3900 (Check 3900	Statement Fielder AL NATIONA P A (Month/Day/Year) FEDERAL NATIONA (Middle) 99/16/2008 FANNIE MAE [FNM] (Middle) 4. Relationship of Reporting 3900 (Check all applicable) E, NW (Check all applicable) $\frac{-X}{0}$ Officer 00 (Zip) Table I - Non-Derivative Securities Beneficially Owned Ownership (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Muly Owned 0 Direct (D) D ate line for each class of securities beneficially SEC 1473 (7-02 ms who respond to the collection of bation contained in this form are not ed to respond unless the form displays a Sec 1473 (7-02	Statement FEDERAL NATIONAL MC P A (Month/Day/Year) 09/16/2008 FANNIE MAE [FNM] (Middle) 4. Relationship of Reporting 900 (Check all applicable) 2, NW (Check all applicable) -XDirector 10% Owner Officer Other (give title below) (specify below) Â 20016 Z. Amount of Securities (Zip) Table I - Non-Derivative Securities Be 2. Amount of Securities 3. 4. Nat Ownership Ownership (Instr. 4) Form: (Instr. Direct (D) or Indirect (I) (Instr. 5) Illy Owned 0 D Ate line for each class of securities beneficially SEC 1473 (7-02) ns who respond to the collection of the torespond unless the form displays a SEC 1473 (7-02)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Derivative	Security:	

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Date	Expiration	Amount or	Security	Direct (D)
Exercisable	Date	Number of		or Indirect
		Shares		(I)
				(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships				
		Director	Director 10% Owner		Other	
LASKAWY PHILIP A C/O FANNIE MAE 3900 WISCONSIN AVENUE, NW WASHINGTON, DC 20016		ÂX	Â	Â	Â	
Signatures						
/s/ Philip A. 09/2 Laskawy	24/200)8				
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.