FEDERAL HOME LOAN MORTGAGE CORPORATION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

FORM 3

1. Name and Address of Reporting Person	2. Date of Event Requiring Statement (Month/Day/Year)	4. Issuer Name and Ticker or Trading Symbol Freddie Mac (FRE)	
Seix Christina (Last) (First) (Middle)	N/A	5. Relationship of Reporting Person to Issuer (Check all applicable) ✔ Director ____ Other (specify below) ____ Officer (give title below) _____ _____	6. If Amendment, Date of Original (Month/Day/Year) 04/26/2002
Federal Home Loan Mortgage Corporation 8200 Jones Branch Drive (Street)	3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)		7. Individual or Joint/Group Filing (Check applicable line) ____ Form filed by One Reporting Person ____ Form filed by More than One Reporting Person
McLean, VA 22102 (City) (State) (Zip)			

Table 1 – Non Derivative Securities Beneficially Owned

1. Title of Security	2. Amount of Securities Beneficially Owned	3. Ownership Form: Direct (D) or Indirect (I)	4. Nature of Indirect Beneficial Ownership
FRE – Common Stock	8,000*	I	Family Foundation

Reminder. Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Print or Type Responses)

FORM 3 (CONTINUED) **Table II – Derivative Securities Beneficially Owned (*e.g.*, puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership
	Date Exercisable	Expiration Date	Title	Amount Or Number of Shares			

Explanation of Responses:

*Original figure did not reflect the disposition of 13,000 shares prior to the initial posting of the Form 3.

/s/ Bancroft Gordon, as attorney-in-fact for Christina Seix
Signature of Reporting Person

03/30/04
Date

(Print or Type Responses)