## 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

## (Print or Type Responses)

1. Name and Ad Person <u>*</u> Williams	-	porting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol FEDERAL HOME LOAN MORTGAGE CORP [FRE]					
(Last)	(First)	(Middle)	12/18/2008	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
8200 JONES BRANCH DRIVE (Street) MCLEAN, VA 22102				(Check all applicable) <u>X</u> Director 10% Or Officer Other (give title below) (specify below		Owner	6. Individual or Joint/Group ner Filing(Check Applicable Line) _X_Form filed by One Reporting		
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securiti	es Be	neficially Owned		
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		4. Nat Owne (Instr.	1			
No Securitie	s Owned		0		D	Â			
Reminder: Repo			ch class of securities benefic	ially SI	EC 1473 (7-02	)			
	inforn requir	nation conta red to respo	oond to the collection of ained in this form are not nd unless the form displ MB control number.						
Т	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)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB APPROVAL

Expires:

response...

Estimated average burden hours per

3235-0104

January 31,

2005

0.5

Shares

(I) (Instr. 5)

## **Reporting Owners**

Person

Reporting Owner Name / Add	Relationships						
	Director	10% Owner	Officer	Other			
Williams Anthony 8200 JONES BRANCH DF MCLEAN, VA 22102	RIVE	ÂX	Â	Â	Â		
Signatures							
/s/ Anthony A. Williams	12/21	/2008					
**Signature of Reporting	D	ate					

## **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.