FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APF	PROVAL
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0.5

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See 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

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1. Name and Address of Reporting Person* <u>HEWSON MARILLYN A</u>						2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT]									lationship of ck all applica Director	ble)	Persor	n(s) to Issue 10% Ov			
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/14/2011									X	below)	Officer (give title below) Executive Vice		Other (s below) resident	pecify		
(Street) BETHESDA MD 20817			20817		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								
(City) (State) (Zip			(Zip)																		
			Table I - Non-	Deriv	ative	Sec	curities A	cqu	ıired, D	Disp	osed	of, or B	enefi	cially (Owned						
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ır) E	2A. Deemed Execution Date if any (Month/Day/Ye		Code (In					5. Amount of Securities Beneficially Owner Following Reporte		Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amour	nt (A)	A) or Price		Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
			Table II - D				urities Ac s, warrant								wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		Deri Sec Acq Disp	erivative decurities acquired (A) or disposed of (D) nstr. 3, 4 and		5. Date Exercisable and Expiration Date Month/Day/Year)		e and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	is lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exe	e ercisable	Exp Date	iration e	Title		unt or ber of es		Transactio (Instr. 4)	on(s)				
Phantom Stock Units	(1)	01/14/2011		J ⁽²⁾			4,362.8964		(2)		(2)	Common Stock	4,362.8964		(2)	7,135.6122 ⁽³⁾		I	Lockheed Martin LTIP		
Phantom Stock Units	(1)								(4)		(4)	Common Stock 678.8		3.8595		678.8595	5(3)	I	LM Supplemental SSP		
Phantom Stock Units	(1)								(5)	5) ((5)		Common Stock 2,452.		2.1328		2,452.132	28 ⁽³⁾	I	Lockheed Martin DMICP

Explanation of Responses:

- 1. The phantom stock units convert on a 1-for-1 basis.
- 2. Settlement in cash of phantom stock units at \$69.91 per share, following a two-year mandatory deferral period, pursuant to the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b).
- 3. End of period holdings include additional phantom stock units acquired through dividend reinvestment under the Plan.
- 4. Phantom stock units previously acquired under the Lockheed Martin Supplemental Salaried Savings Plan exempt under Section 16(b) and will be settled upon the reporting person's retirement or termination of service.
- 5. Phantom stock units previously acquired under the Lockheed Martin Deferred Management Incentive Compensation Plan exempt under Section 16(b) which will be settled in stock upon the reporting person's retirement or termination of service.

Marillyn A. Hewson, by David A. Dedman, Attorney-in-Fact

01/19/2011

** Signature of Reporting Person

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.