FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DC	20549
vasiliigton,	D.C.	20049

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

	OMB APPI	OMB APPROVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
- 1	hours por response:	0.5							

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* St John Frank A					2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) 6801 RO	(Fi	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/22/2024							X	X Officer (give title below) Other (specify below) Chief Operating Officer					
(Street) BETHES	SDA M	D	20817	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	ate)	(Zip)	F [Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tal	ole I - Non-	Derivati	ve Se	curities	Acc	quired, D	ispos	ed of	, or Ben	eficially	Owned					
Date			2. Transactio Date Month/Day/	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				5. Amoun Securities Beneficia Owned Fo	For lly (D) ollowing (I) (Form: (D) or	rm: Direct I or Indirect E (Instr. 4)	7. Nature of ndirect Beneficial Ownership				
								Code	Amo	ount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)			(Instr. 4)	
			Table II - D (e					ired, Dis					Owned					
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)	Code	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisable	Expira Date		Title	Amount or Number of Shares	nount (Instr. 4)					
Restricted Stock Units	(1)	02/22/2024		А		4,546 ⁽²⁾		(2)	02/22/	2027	Common Stock	4,546(2)	\$0.0000	4,546	6	D		

- 1. Each restricted stock unit represents a contingent right to receive one share of LMT common stock.
- 2. Award of restricted stock units which vests on the third anniversary of the grant date. Per the award agreement, vesting may be accelerated to the extent necessary to satisfy tax withholding obligations for retirement-eligible reporting persons and such vested shares shall be disposed to the Issuer for the purposes of satisfying the reporting person's tax withholding obligations, which is an exempt transaction under Rule 16b-3.

Frank. A. St. John, by John E. Stevens, Attorney-in-fact

02/26/2024

** 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.