FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT]									ck all applica Director	ble)			Owner	
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/14/2015								X	X Officer (give title Other (sp below) Executive Vice President						
(Street) BETHES	SDA M	MD	20817		4. If A	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)																	
			Table I - Non-			_		cqu	1	Disp						. 1		1		
1. Title of S	Security (Ins	tr. 3)		Date	d. Transaction Date Month/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Ins					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code		Amour	Amount (A)							Price	
			Table II - D				urities Ac s, warrant								wned					
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)	Transaction Code (Instr. 8)		Deri Sec Acq Disp	Derivative Securities Acquired (A) or Disposed of (D) Instr. 3, 4 and		6. Date Exercisable a Expiration Date (Month/Day/Year)		e and	7. Title and Ar Securities Un Derivative Sec (Instr. 3 and 4		lying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exe	e ercisable	Exp Dat	iration e	Title	Amou Numl Share	er of		Transaction(s) (Instr. 4)				
Phantom Stock Units	(1)	01/14/2015		J ⁽²⁾			1,755.3652		(2)	(2)		Common Stock	1,755.3652		(2)	0.0000		I	Lockheed Martin LTIP	
Phantom Stock Units	(1)								(3)		(3)	Common Stock 1,798.		98.719	1,798.71		9 ⁽⁴⁾	I	LM Supplemental SSP	
Phantom Stock Units	(1)									(5)		Common Stock	7,28	3.5274		7,283.527	74 ⁽⁴⁾	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 \$192.57 per share, following a two-year mandatory deferral period, pursuant to the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b).
- 3. 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.
- 4. End of period holdings include phantom stock units acquired through dividend reinvestment.
- 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.

Richard F. Ambrose, by Marian S. Block, Attorney-in-fact

01/16/2015

** 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.