## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sec	ction 30(h)	or the	investmen	IL CON	ipany Act	01 1940							
1. Name and Address of Reporting Person <sup>*</sup> Donovan John					2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP								elationship of eck all applica		Perso	. ,		
										L			X Director			10% Ow	ner	
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2022											Other (s below)	pecify	
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. lr	6. Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)						
BETHES	SDA N	1D	20817										-	,	•	ting Person		
,													Form filed by More than One Reporting Person			ng		
(City)	(5	State)	(Zip)															
		Т	able I - Non-E	Derivat	ive S	ecuritie	s Ac	quired,	Disp	oosed o	of, or Be	eneficially	v Owned					
Date				Transact ate Ionth/Day		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.					Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) (D)	or Price	Reported Transactio (Instr. 3 au	on(s)			Instr. 4)			
4 Tale of		2 T		g., put	ve Se ts, ca	lls, warr	ants	s, option	is, c	onverti	ble sec	urities)				10.	4	
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)	4. Transa Code ) 8)		ction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		Securitie	id Amount of s Underlying e Security nd 4)	8. Price of Derivative Security (Instr. 5)		e s illy g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	01(5)			
																	Lockheed	

## Phantom Stock Martin Directors Commor Stock 101.9312 (1) 09/30/2022 101.9312 (2) (2) (2) 365.2375<sup>(3)</sup> Units Deferred Comp Plan Lockheed Phantom Martin (1) (4) Commo (4) 509.9749 509.9749<sup>(3)</sup> Stock Stock Directors Units Equity Plan

Explanation of Responses:

1. Each share of phantom stock is the economic equivalent of one share of Lockheed Martin Corporation common stock.

2. The information pertains to phantom stock units acquired at \$386.29 per share through director retainer fee deferral under the Lockheed Martin Corporation Directors Deferred Compensation Plan exempt under Section 16(b). Units are settled in cash upon the reporting person's retirement or termination of service.

3. End of period holdings include additional acquisitions through dividend reinvestment.

4. The information pertains to previously acquired stock units under the Lockheed Martin Corporation Amended and Restated Directors Equity Plan exempt under Section 16(b). Settlement in cash or stock (as elected by the director) will occur upon the reporting person's retirement or termination of service, except that non-employee directors who have satisfied our stock ownership guidelines may elect to have payment of awards (together with any dividend equivalents thereon) made on the first business day of April following vesting of the award.

John M. Donovan, by Kerri R. 10/04/2022

Morey, Attorney-in-fact

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.