FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

		Tabla I Non	-Derivative Securities Acquired, Disposed of, or Ben		wood				
(City)	(State)	(Zip)			Form med by More that				
(Street) BETHESDA	MD	20817	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv X	ridual or Joint/Group Filing Form filed by One Rep				
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 01/30/2006		Exec VP & CFO				
1. Name and Address of Reporting Person* <u>KUBASIK CHRISTOPHER E</u>			2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT]		tionship of Reporting Pers all applicable) Director Officer (give title below)	son(s) to Issuer 10% Owner Other (specify below)			

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											

	(e.g., puis, cais, warrants, options, convertible securities)														
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. Transaction Code (Instr. 8)		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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Phantom Stock Units	(1)	01/30/2006		A		3,809.3876		(2)	(2)	Common Stock	3,809.3876	\$66.66	11,445.1636	I	Lockheed Martin DMICP
Phantom Stock Units	(1)							(3)	(3)	Common Stock	7,045.5351		7,045.5351	I	Lockheed Martin LTIP
Phantom Stock Units	(1)							(4)	(4)	Common Stock	1,186.667		1,186.667	I	Lockheed Martin Supplemental

Explanation of Responses:

1. The phantom stock units convert on a 1 for 1 basis.

2. The information pertains to the phantom stock units acquired under the Lockheed Martin Deferred Management Incentive Compensation Plan exempt under Section 16(b) and will be settled in stock upon the reporting

person's retirement or termination of service.

3. The information pertains to the phantom stock units voluntarily deferred under the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b) and will be settled in stock upon the reporting person's retirement or termination of service.

4. The information pertains to the phantom stock units 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.

Remarks:

Christopher E. Kubasik, by David A. Dedman, Attorney-in-Fact

02/01/2006

SSP

** 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.