UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Ferson				er Name and Ticke KHEED MA	0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 6801 ROCKLE	(First) DGE DRIVE	(Middle)	3. Date 01/28/	of Earliest Transa 2010	ction (Month/Da	y/Year)	X	Officer (give title below) Executive V	Other below) /ice President	(specify		
(Street) BETHESDA 	MD	20817	4. If Am	nendment, Date of	Original Filed (I	/lonth/Day/Year)	6. Indiv X	idual or Joint/Group I Form filed by One Form filed by More	Reporting Persor	n		
(City)	(State)	(Zip) Table I - Non-De	rivative s	Securities Ac	quired, Dis	oosed of, or Benefic	ially O	wned				
1 Title of Security	(Inctr 2)	2 75	ansaction	24 Deemed	2	4 Securities Acquired (A)	.r.	5 Amount of	6 Ownership	7 Nature of		

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	ate, Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	(D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, 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. Transa Code (8)		Derivative		6. Date Exerc Expiration Da (Month/Day/Y	ate			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	\$0 ⁽¹⁾	01/28/2010		A		5,584.718		(2)	(2)	Common Stock	5,584.718	\$0 ⁽²⁾	16,750.4028 ⁽³⁾	I	Lockheed Martin LTIP
Phantom Stock Units	(1)							(4)	(4)	Common Stock	2,651.1086		2,651.1086 ⁽³⁾	I	LM Supplemental SSP
Phantom Stock Units	(1)							(5)	(5)	Common Stock	6,633.0529		6,633.0529 ⁽³⁾	I	Lockheed Martin DMICP

Explanation of Responses:

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

2. Phantom stock units acquired and subject to mandatory deferral under the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b) at \$75.35 which will be settled in cash after two years subject to continued employment, unless voluntarily deferred (in which case, the units will be settled in stock upon the reporting person's retirement or termination of service).

3. End of period holdings include additonal 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.

Remarks:

Ralph D. Heath, by David A. Dedman, Attorney-in-Fact

02/01/2010

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.

** Signature of Reporting Person