FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHAN	IGES IN BENEFICIAL	OWNERSHIP

OMB APPR	OVAL					
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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					2.1	Issuer N	lama anı	d Tiol		Tanadia	: C:ll				4:1-:	n of Donortir	ag Dorcon(c)	o lecuor
1. Name and Address of Reporting Person* <u>Lavan Maryanne</u>					2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT]								all app Direc	olicable) ctor		% Owner		
(Last) 6801 RO	(Fi CKLEDGE	,	Middle	2)	3. Date of Earliest Transaction 07/20/2017					on (Mor	nth/Day/Year)			X	Officer (give title below) SVP & Ger		Other (specify below) neral Counsel	
(Street) BETHES (City)			20817 (Zip)	,	4. 1	I. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv Line) X	Forn Forn	I or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
		Tab	le I - I	Non-Deriv	ative	e Sec	urities	Acc	quir	ed, D	Disposed (of, or	Benefic	ially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date			2. Transaction Date (Month/Day/Y	ear)	Execution Date,		Co	3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 9)		Beneficially Owned Following		ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership				
							Co	ode	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)		(Instr. 4)	
Common Stock 07/20/2017					17	7			S		1,800	D	\$290.37	736 ⁽¹⁾ 11,		715.36 ⁽²⁾	D	
Common Stock 07/20/2017				17	7			S		8,200	D	\$290.04	1497 ⁽³⁾ 3,5		15.36 ⁽²⁾	D		
Common Stock														682	2.7628 ⁽²⁾	I	Lockheed Martin Salaried Savings Plan	
		Ta	able I	I - Derivat (e.g., pı							posed of, , converti				wned		,	•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any (Month/Day/Year) Cc 8)		Trans Code	ransaction of ode (Instr. Derivative		ive ies ed	Expiration (Month/Da			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	erivative ecurity 1str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	V	(A) (D)	Exer	rcisable	e Date	Title	Shares					

Explanation of Responses:

- 1. The price represents the weighted average sale price for multiple transactions reported on this line. Sale prices ranged from \$290.33 to \$290.40. Reporting Person will provide, upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate sales price.
- 2. End of period holdings include additional acquisitions through dividend reinvestment.
- 3. The price represents the weighted average sale price for multiple transactions reported on this line. Sale prices ranged from \$289.35 to \$290.31. Reporting Person will provide, upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate sales price.

Maryanne R. Lavan, by Marian 07/20/2017 S. Block, Attorney-in-Fact

** 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.