FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	2225 020						

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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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  VAN SCHAICK ANTHONY				2. Issuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [ LMT ]								(Chec	ationship of k all applica Director	ble)	Person	n(s) to Issue 10% Ov Other (s	vner		
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/17/2006									X	Officer (give title below)  Vice President an			below)	респу
(Street) BETHESDA MD 20817				4. 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)												Tom filed by More than				
			Table I - Non	-Deriv	ative	Se	curities A	cqui	red, C	Dispo	sed	of, or B	enefic	ially C	Owned				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ar) li	2A. Deemed Execution Dat If any (Month/Day/Ye	Code (In						Securities Beneficial Following	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								[	Code V		Amount (/		) or	rice	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
			Table II - D	Deriva e.g., p	tive S	Secu	urities Ac	quire ts, o	ed, Dis	spos s, cor	ed o	f, or Ber ible sec	neficia curitie:	ılly Ov s)	vned				
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. S)		Deri Sec Acq Disp	lumber of ivative urities juired (A) or posed of (D) tr. 3, 4 and	6. Date Exercisable ar Expiration Date (Month/Day/Year)		and	7. Title and Amou Securities Under Derivative Securi (Instr. 3 and 4)		ing	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	cisable	Expira Date	ation	Title	Amoun Numbe Shares	r of		Transactio (Instr. 4)	on(s)		
Phantom Stock Units	(1)	01/17/2006		J <sup>(2)</sup>			5,506.8091		(2)	(2	2)	Common Stock	5,506	.8091	\$63.63	5,916.27	01	I	LM LTIP
Phantom Stock Units	(1)								(3)	(3	3)	Common Stock	1,634	.6924		1,634.69	24	I	Lockheed Martin Supplemental SSP
Phantom Stock Units	(1)								(4)	(4	1)	Common Stock	6,767	.7437		6,767.74	37	I	Lockheed Martin DMICP

## **Explanation of Responses:**

- 1. The phantom stock units convert on a one-for-one basis.
- 2. Settlement in cash of phantom stock units acquired pursuant to the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b).
- 3. 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
- 4. 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

#### Remarks:

Anthony G. Van Schaick, by David A. Dedman, Attornev-in-

01/19/2006

**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.