FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington, D.0	20549

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

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

Instruct	ion 1(b).				ant to Section 16 ection 30(h) of th							ı		<u> </u>		<u> </u>	
1. Name and Address of Reporting Person* <u>Ulmer Gregory M</u>					2. Issuer Name and Ticker or Trading Symbol  LOCKHEED MARTIN CORP [ LMT ]							(Che	eck all applic	able)	g Perso	Person(s) to Issuer  10% Owner  Other (specify	
(Last) (First) (Middle) 6801 ROCKLEDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 02/25/2021						_	below)					
(Street) BETHES	DA N	МD	20817	4. If An	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	?)	State)	(Zip)														
			Table I - Non-	-Derivative S	Securities A	cqu	uired,	Disp	osed	of, oı	r Bene	ficially	Owned				
Date		2. Transaction Date (Month/Day/Year)	Execution Date,		Transaction Dispo			rities Acquired (A) or ed Of (D) (Instr. 3, 4 an			Beneficia Owned F	s Illy ollowing	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	:	(A) or (D)	Price	Transacti (Instr. 3 a	tion(s)			(Instr. 4)	
					ecurities Acalls, warrant								Owned				
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, Transacti rity or Exercise (Month/Day/Year) if any Code (Ins		Transaction Code (Instr.							erlying urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

(1)

(3)

02/25/2021

02/26/2021

Restricted

Phantom

Phantom

Stock

Units

Stock

Stock

- 1. Each restricted stock unit represents a contingent right to receive one share of LMT common stock.
- 2. Award of restricted stock units which vests on the third anniversary of the grant date. Per the award agreement, vesting may be accelerated to the extent necessary to satisfy tax withholding obligations for retirementeligible reporting persons and such vested shares shall be disposed to the Issuer for the purposes of satisfying the reporting person's tax withholding obligations, which is an exempt transaction under Rule 16b-3.

Date Exercisable

(2)

(4)

(D)

(A)

3,511<sup>(2)</sup>

155.7926

Code

- 3. The phantom stock units convert on a one-for-one basis.
- 4. Phantom stock units acquired at \$330.25 per share through voluntary deferral under under the Lockheed Martin Deferred Management Incentive Compensation Plan exempt under Section 16(b) which will be settled in stock following the reporting person's retirement or termination of service.
- 5. Phantom stock units acquired under the Lockheed Martin Supplemental Savings Plan exempt under Section 16(b) which will be settled in cash upon the reporting person's retirement or termination of service.

Gregory M. Ulmer, by Kerri R. Morey, Attorney-in-fact

Amount or Number of Shares

3,511(2)

155.7926

501.6273

Stock

Commor

Stock

\$0.0000

(4)

Expiration Date

02/25/2024

(4)

(5)

03/01/2021

\*\* Signature of Reporting Person

Date

(Instr. 4)

3,511

1,078.0911

501.6273

D

Lockheed

Supplemental Savings Plan

Martin DMICP

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.