FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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* COUTTS ROBERT B (Last) (First) (Middle) 6801 ROCKLEDGE DRIVE						Ssuer Name and Ticker or Trading Symbol LOCKHEED MARTIN CORP [LMT] 3. Date of Earliest Transaction (Month/Day/Year) 01/14/2005									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Executive Vice President				
(Street) BETHESDA		MD	20817		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						I	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)																
1. Title of Security (Instr. 3)				-Derivative Solution 2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year		3. Transactio		str.		A) or	5. Amount Securities Beneficiall Following Transactio	. Amount of ecurities eneficially Owned ollowing Reported ransaction(s)		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amour	t (A) or)	Price	(Instr. 3 an	d 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)	Transaction Code (Instr. 8)		Deri Sec Acq Disp	erivative I		6. Date Exercisable an Expiration Date (Month/Day/Year)		e and	7. Title and Amount Securities Underlyin Derivative Security (3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following	e S Illy	f 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exer	e rcisable	Exp Date	iration	Title		unt or per of es		Reported Transaction(s) (Instr. 4)			
Phantom Stock Units	(1)	01/14/2005		J (2)			13,180.0226		(2)	(2)		Common Stock	13,180.0226		\$55.55	15,340.2679		I	Lockheed Martin LTIP
Phantom Stock Units	(1)								(3)		(3)	Common Stock	16,472.2714			16,472.2714		I	Lockheed Martin DMICP
Phantom Stock Units	(1)								(4)	(4)		Common Stock	2,455.1086			2,455.10	086	I	Lockheed Martin Supplemental SSP

Explanation of Responses:

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

David A. Dedman Attorney-in-

Fact

** Signature of Reporting Person

Date

01/19/2005

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.