UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response:	0.5								

(Instr. 4)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			01 300		vesiment con							
1. Name and Address of Reporting Person* Gooden Linda R				Name and Ticker (KHEED MAF	0,			tionship of Reporting all applicable) Director Officer (give title	10% (Other	(s) to Issuer 10% Owner Other (specify		
(Last) 6801 ROCKLEI	(First) DGE DRIVE	(Middle)	3. Date o 01/28/2	of Earliest Transacti 010	ion (Month/Da	y/Year)		below) Executive V)			
(Street) BETHESDA	MD	20817	4. If Ame	ndment, Date of O	riginal Filed (N	/onth/Day/Year)	6. Indiv X	ndividual 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)								0		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			

(A) or (D) Transaction(s) (Instr. 3 and 4) Code Amount Price 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)	Code (saction e (Instr. berivative securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		.) or f (D)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Phantom Stock Units	\$0 ⁽¹⁾	01/28/2010		A		4,188.5386		(2)	(2)	Common Stock	4,188.5386	\$0 ⁽²⁾	9,169.0186 ⁽³⁾	I	Lockheed Martin LTIP
Phantom Stock Units	(1)							(4)	(4)	Common Stock	514.4994		514.4994 ⁽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 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:

Linda R. Gooden, by David A.

Dedman, Attorney-in-Fact

02/01/2010

Reported

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

FORM 4