FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 20(h) of the Investment Company Act of 1040

of Section 30(n) of the investment Company Act of 1940										
1. Name and Addre Barbour Sone	ss of Reporting Perso <u>lra L</u>	on*	2. Issuer Name and Ticker or Trading Symbol <u>LOCKHEED MARTIN CORP</u> [LMT]		ionship of Reporting Perso all applicable) Director Officer (give title below)	on(s) to Issuer 10% Owner Other (specify below)				
(Last) 6801 ROCKLEJ	(First) DGE DRIVE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/14/2015		Executive Vice	,				
(Street) BETHESDA 	MD (State)	20817 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	 6. Individual or Joint/Group Filing (Check Applica X Form filed by One Reporting Person Form filed by More than One Reporting 						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										

1. Title of Security (Instr. 3)	Date	if any 🤺						Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Table II. Derivative Securities Acquired Disposed of an Repeticially Owned											

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)	4. Transa Code (8)		Deri Secu Acq Disp	umber of vative urities uired (A) or iosed of (D) ir. 3, 4 and	6. Date Exercisable and Expiration Date (Month/Day/Year) 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	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		Transaction(s) (Instr. 4)		
Phantom Stock Units	(1)	01/14/2015		J ⁽²⁾			3,686.2669	(2)	(2)	Common Stock	3,686.2669	(2)	1,630.9836 ⁽³⁾	Ι	Lockheed Martin LTIP
Phantom Stock Units	(1)							(4)	(4)	Common Stock	1,399.4931		1,399.4931 ⁽³⁾	I	LM Supplemental SSP
Phantom Stock Units	(1)							(5)	(5)	Common Stock	829.9479		829.9479 ⁽³⁾	I	Lockheed Martin DMICP

Explanation of Responses:

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

2. Settlement in cash of phantom stock units at \$192.57 per share, following a two-year mandatory deferral period, pursuant to the Lockheed Martin Long Term Incentive Plan exempt under Section 16(b).

3. End of period holdings include phantom stock units acquired through dividend reinvestment.

4. Phantom stock units previously 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.

5. 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.

Sondra L. Barbour, by Marian S.	01/16/2015			
Block, Attorney-in-fact	01/16/2015			

** 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.