FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL
OMB Number:	3235-0287
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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).

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*  ZELNAK STEPHEN P JR						2. Issuer Name and Ticker or Trading Symbol  MARTIN MARIETTA MATERIALS INC [									heck all	ship of Reportir applicable) rector	ng Persor	10% C		
(Last) (First) (Middle) 2710 WYCLIFF ROAD					MLM ]  3. Date of Earliest Transaction (Month/Day/Year) 05/09/2019											ficer (give title low)		Other (specify below)		
(Street) RALEIGH NC 27607 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X F					
		Tabl	e I - Non	-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	osed o	f, or	Bene	eficia	lly Ow	ned				
Date				Date	Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Disposed Code (Instr. 5)					nd Sed Ber Ow	mount of urities eficially ned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (E	() or ()	Price	Tra	orted nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common	Stock			05/09	9/2019	9			A		600		A	\$0 22,744 D						
		Та	ble II - D (e								sed of, onvertib				/ Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Insti				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		Owr Forr Dire or Ir (I) (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Sha	nber						

**Explanation of Responses:** 

/s/ Roselyn R. Bar, attorney-in-05/13/2019

Date

**fact** 

\*\* Signature of Reporting Person

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.