FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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UNIB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## 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(c). S	ee Instruction 1	0.																	
Name and Address of Reporting Person*     Pike Thomas				MA	2. Issuer Name <b>and</b> Ticker or Trading Symbol MARTIN MARIETTA MATERIALS INC								(Cł	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
					[ M	[ MLM ]									ctor er (give title		Other (	-	
(Last) (First) (Middle)					2 Da									-	belo			below)	specify
4123 PARKLAKE AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 11/29/2024														
(Street)					4. If A	Amend	ment,	Date o	f Origina	al Filed	d (Month/Da	y/Yea	r)	6. I Lin		or Joint/Grou	ıp Filir	ng (Check A	pplicable
RALEIG	H NO	2	7612												Form filed by One Reporting Person				
,															Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)												1 613	OII			
		Table	I - Noi	n-Deriva	itive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ally Owr	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (ADisposed Of (D) (Instr. 3 5)				4 and Securities Beneficially Owned Follo		Forn (D) c	Ownership orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount (A		) or )	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 11/29/2					2024		Α		53(1)	A		\$60	4,011			D			
		Tal									osed of, o					d	<u>'</u>		
1. Title of Derivative Security  1. Title of Conversion or Exercise (Instr. 3)  2. Conversion Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  6. Derivative Security  3. Transaction Date (Month/Day/Year)  6. Derivative Security		on Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y Ov Fo Dir or (I)	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	or Nur of	ount nber ires					

## **Explanation of Responses:**

1. Common stock units were accrued under the Martin Marietta Materials, Inc. Common Stock Purchase Plan for Directors (the "Plan") and are to be settled in stock in a lump sum or in installments not to exceed 10 years commencing on (i) the date the reporting person ceases to be a Non-Employee Director, (ii) the date that is one month and one year following the date the reporting person ceases to be a Non-Employee Director, or (iii) the date elected by the Non-Employee Director that is later than the third anniversary of the date the fees are earned, in accordance with the reporting person's election under the Plan.

/s/ Roselyn R. Bar, attorney-

12/03/2024

in-fact

\*\* 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.