FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

| Check to Sect obligat Instruc | | l pursua | ant to S | ection | 16(a) | of the Se | curitie | es Exchangenpany Act of | e Act o | | RSH | IIP | Estim | | er: ; verage burde sponse: | 3235-0287 en 0.5 | | | |
|---|--|----------|--------------|---|---|---|--|--|------------------|-------|---|------------|---|-------------------------|--|---|---|--|-----------|
| Name and Address of Reporting Person* Foxx Anthony R | | | | | 2. Issuer Name and Ticker or Trading Symbol MARTIN MARIETTA MATERIALS INC [MLM] | | | | | | | | | 5. Relat Check X | all appl Direct | icable) | ng Per | rson(s) to Is 10% Ov | vner |
| (Last) (First) (Middle) 2710 WYCLIFF ROAD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/06/2020 | | | | | | | | | | below |) `` | | below)` | | |
| (Street) RALEIG | | | 7607 Zip) | | 4. If A | Amend | ment, | Date o | f Origina | Filed | (Month/Da | y/Year) | | 3. Indivi Line) X | Form | filed by On | e Rep | g (Check A orting Person | on |
| | | Table | I - Nor | n-Deriva | tive S | Secui | rities | Acq | uired, | Disp | osed of | or B | enefic | ially | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date, | | | 3. 4. Securities Acq Transaction Disposed Of (D) (5) 5) | | | | s Acquired (A) or If (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | V | Amount | (A) (D) | or Pric | Tra | | Transaction(s) (Instr. 3 and 4) | | | (11341.4) |
| Common Stock | | | | 11/06/ | 6/2020 | | | | A | A 508 | | A | | \$0 | | 508 | | D | |
| | 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) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | 8. Price or Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersl Form: Direct (I or Indire (I) (Instr. | Ownership | Beneficial Ownership ct (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

/s/ Roselyn R. Bar, attorney-

in-fact

** Signature of Reporting Person

11/10/2020

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.