FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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* SHEPHERD DANIEL G | | | | | <u>M</u> | 2. Issuer Name and Ticker or Trading Symbol MARTIN MARIETTA MATERIALS INC MLM] | | | | | | | | [(Che | elationship c eck all applic Directo | able) | g Pers | on(s) to Iss 10% Ov Other (s | vner | |
|---|---|--|--|-------------------------------|-----------|--|---|---------|--|----------------------------------|-------|--------------------------|--|--|---|---|---|--|--|--|
| (Last) (First) (Middle) MARTIN MARIETTA MATERIALS, INC. | | | | | | Date 0 | | est Tra | ansac | tion (Mo | nth/[| Day/Year) | | below) | | ıg and | below) | ` | | |
| 2710 WYCLIFF ROAD | | | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) RALEIGH NC 27607 | | | | | | | | | | | | | | - 1 | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | 1 01001 | | | | | |
| | | Tal | ble I - No | n-Deriv | /ativ | e Se | curit | ies A | cqu | uired, I | Dis | posed of | , or Ben | eficiall | y Owned | | | | | |
| Date | | | | 2. Transa Date (Month/D | | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | te, | 3. Transaction Code (Instr.) 8) | | | | | Beneficia Owned F | s ally ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | |
| Common | mon Stock 12/01/2 | | | | /2003 | 2003 | | | | M | | 659 | A | \$32.36 | 8 10, | 631 | | D | | |
| Common | Stock 12/01/2 | | | | /2003 | 2003 | | | | F | | 207 | D | \$43.16 | 5 10,424 | | | D | | |
| | | | Table II - | | | | | | | | | osed of, convertib | | | Owned | | | | | |
| 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, Tr | Code (Ins | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | le and | 7. Title an Amount o Securities Underlyin Derivative (Instr. 3 ar | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ow For Ily Dire or I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) (D) | | Date Exer | e rcisable | | opiration ate | Title | Amount or Number of Shares | | | | | | |
| Incentive | (2) | 12/01/2003 | | | M | | | 659 | 12/0 | 1/2003 ⁽¹⁾ | 12 | 2/01/2003 ⁽¹⁾ | Common | 659 | \$32.368 | 0.00 | | D | | |

Explanation of Responses:

- 1. Units were awarded in January 2001 under the Martin Marietta Materials, Inc. Incentive Stock Plan. Units vested as of December 1, 2003.
- 2. Conversion price is 1 share of common stock for 1 unit.

Remarks:

Daniel G. Shephard

12/03/2003

** 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.