FORM 3

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

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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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*  PEREZ LAREE E  2. Date of Event Requiring Statement (Month/Day/Year) 10/20/2004				nent	3. Issuer Name and Ticker or Trading Symbol  MARTIN MARIETTA MATERIALS INC [ MLM ]									
(Last) P.O. BOX 332	(First) P.O. BOX 332	(Middle)			Relationship of Reporting Person(s) to (Check all applicable)     X Director 10%				5. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) CORRALES (City)	NM (State)	87048 (Zip)				Officer (give title below)	Other (spe below)	ecify		cable Line) Form filed by	/Group Filing (Check y One Reporting Person y More than One erson			
	Table I - Non-Derivative Securities Beneficially Owned													
1. Title of Security (Instr. 4)						ınt of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
No securities owned						0.00	D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable Expiration Date (Month/Day/Year)			ate	d 3. Title and Amount of Secur Underlying Derivative Securi			4. Conve	rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
			Date Exercisable	Expiratio Date	n Title	3	Amount or Number of Shares	Price of Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)				

Explanation of Responses:

Laree E. Perez

10/21/2004

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).