Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
MARTIN MARIETTA PENSION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 04/01/1966

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
MARTIN MARIETTA MATERIALS, INC.

4123 PARKLAKE AVENUE
RALEIGH, NC 27612

2b Employer Identification Number (EIN)
56-1848578

2c Plan Sponsor's telephone number
919-781-4550

2d Business code (see instructions)
212320

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2026	KARLA M. WOOD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	16206
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	8654
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	8440
b	Retired or separated participants receiving benefits	**6b**	3999
c	Other retired or separated participants entitled to future benefits	**6c**	2717
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	15156
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1070
f	Total. Add lines **6d** and **6e**.	**6f**	16226
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	895
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

1A 1B

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	1260491273
b Actuarial value	**2b**	1228305030

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	4893	438759856	438759856
b For terminated vested participants	2724	84877853	84877853
c For active participants	8654	281593751	316105938
d Total	16271	805231460	839743647

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.39 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	37402940
b Expected plan-related expenses	**6b**	6153563
c Target normal cost	**6c**	43556503

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary

08/18/2026
Date

WILLIAM M DEGOTHSEIR
Type or print name of actuary

26-07985
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

215-246-6000
Telephone number (including area code)

PO BOX 674401
HOUSTON, TX 77267
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	211554256
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	211554256
10	Interest on line 9 using prior year's actual return of 6.85 %	0	14491467
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		22967675
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.21 %		1196616
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		24164291
d	Portion of (c) to be added to prefunding balance		24164291
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	250210014

Part III Funding Percentages

14	Funding target attainment percentage	14	116.47 %
15	Adjusted funding target attainment percentage	15	146.27 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	124.82 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: 5.07 %	2nd segment: 5.31 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	61

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	43556503
b Excess assets, if applicable, but not greater than line 31a	**31b**	43556503

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NORTHERN TRUST CORPORATION

36-2723087

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

NORTHERN TRUST INVESTMENTS INC

36-3608252

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52	NONE	3887687	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

WILLIS TOWERS WATSON US LLC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	1379972	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

HARRISON STREET ADVISORS, LLC

45-3147571

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	350299	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

NORTHERN TRUST COMPANY

36-1561860

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50	NONE	179751	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

UBS GLOBAL ASSET MANAGEMENT

36-3718331

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	104688	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

NISA INVESTMENT ADVISORS L.L.C

48-1140940

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	81408	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: DB PLAN MASTER RETIREMENT TRUST

b Name of sponsor of entity listed in (a): MARTIN MARIETTA MATERIALS

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
56-1848578-011	M	1398022000

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	25000000	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	1237524000	1398022000
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	1262524000	1398022000
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	1262524000	1398022000

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		186866840
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		186866840
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	43559000	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		43559000
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	1168983	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	4424082	
(6) Bank or trust company trustee/custodial fees	2i(6)	179751	
(7) Actuarial fees	2i(7)	210989	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	1826035	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		7809840
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		51368840
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		135498000
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: FORVIS MAZARS, LLP **(2)** EIN: 44-0160260

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 589767.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 36-3046063

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 121

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☒ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: 59.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 8.0 %
High-Yield Debt: 0.0 % Real Assets: 10.0 % Cash or Cash Equivalents: 0.0 % Other: 23.0 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☒ 10-15 years ☐ 15 years or more

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

FINANCIAL STATEMENTS

Martin Marietta Pension Plan
Years Ended December 31, 2025 and 2024

Martin Marietta Pension Plan

Audited Financial Statements

Years Ended December 31, 2025 and 2024

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Independent Auditor's Report

Benefit Plan Committee
Martin Marietta Pension Plan
Raleigh, North Carolina

Opinion

We have audited the financial statements of Martin Marietta Pension Plan (the "Plan"), an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974* ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that these financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the plan, and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that

includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule listed in the table of contents as of December 31, 2025, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Forvis Mazars, LLP

Raleigh, North Carolina
October 13, 2026

Federal Employer Identification Number: 44-0160260

Martin Marietta Pension Plan

Statements of Net Assets Available for Benefits

	December 31	
	2025	**2024**
	(In Thousands)	
Assets		
Interest in Master Trust, at fair value	**$ 1,398,022**	$ 1,237,524
Contributions receivable	**–**	25,000
Net assets available for benefits	**$ 1,398,022**	$ 1,262,524

See accompanying notes.

Martin Marietta Pension Plan

Statements of Changes in Net Assets Available for Benefits

	Years Ended December 31	
	2025	**2024**
	(In Thousands)	
Net assets available for benefits at beginning of year	**$ 1,262,524**	$ 1,202,713
Additions to net assets:		
Contributions	**–**	25,000
Net investment gain of Master Trust	**186,867**	81,203
Total additions	**186,867**	106,203
Deductions from net assets:		
Benefits paid to participants	**43,559**	40,649
Administrative expenses	**7,810**	5,743
Total deductions	**51,369**	46,392
Net increase in net assets available for benefits	**135,498**	59,811
Net assets available for benefits at end of year	**$ 1,398,022**	$ 1,262,524

See accompanying notes.

Martin Marietta Pension Plan

Notes to Financial Statements

1. Significant Accounting Policies

Basis of Accounting

The financial statements of the Martin Marietta Pension Plan (the Plan) have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America (GAAP).

Investment Valuation and Income Recognition

The assets of the Plan are held and invested in the Martin Marietta Materials, Inc. Defined Benefit Plans Master Retirement Trust (the Master Trust). Currently, there are no other plans with assets held in the Master Trust.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation or depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

The Plan's interest in the Master Trust is stated at the fair value of the underlying net assets in the Master Trust. Fair value, as defined under GAAP, is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. GAAP establishes a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to fair values with unobservable inputs (Level 3).

These tiers include:

Level 1 – Quoted prices in active markets for identical investments as of the reporting date.

Level 2 – Inputs other than quoted prices included within Level 1 that are either directly or indirectly observable as of the reporting date, and fair value can be determined through the use of models or other valuation methodologies.

Level 3 – Unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumptions regarding risk.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

At December 31, 2025 and December 31, 2024, in addition to investments held by the Plan that were measured at net asset value (NAV) or its equivalent, in accordance with Accounting Standards Codification *Topic 820: Fair Value Measurement and Disclosures,* the Plan also held government securities, which are valued at Level 1 and swap contracts, which are valued at Level 2.

C*ommon Collective Investment Trusts*
These funds generally invest in publicly traded securities valued using the NAV provided by the administrator of the trusts. The NAV is based on the value of the underlying assets owned by the trusts, minus their liabilities, and then divided by the number of shares outstanding.

Real Estate Funds
The Plan's investments in the UBS Trumbull Property Fund, the AEW Core Property Trust, and the Harrison Street Core Property Fund are valued at NAV based on the Plan's proportionate share of the real estate funds' fair value as recorded by the Trustees. The funds are real estate investment trust-based funds that offer participation in an actively managed, primarily core portfolio of equity real estate. The funds allocate gains, losses and expenses to investors based on the ownership percentage to determine the NAV.

Private Infrastructure Fund
The Plan's investment in the GDIF Stapled Entities Fund is valued at NAV based on the Plan's proportionate share of the infrastructure fund's fair value as recorded by the Trustees. The fund offers participation in an actively managed, diversified portfolio of infrastructure asset types such as rail, airports, toll roads and water, gas, and electric utilities. The fund allocates gains, losses and expenses to investors based on the ownership percentage to determine the NAV.

Government Securities
The Plan's investments in government securities are valued at Level 1. Government securities are bonds issued by the U.S. Treasury. The primary purpose of the securities is to better align the asset duration with the Plan's liability duration to provide a partial hedge against changes in liability value due to changes in treasury rates. Government bonds are also expected to provide liquidity and safety during periods of market stress.

Hedge Funds
The Plan's hedge fund investments are valued at NAV based on the Plan's proportionate share of the hedge funds' fair values as recorded by Northern Trust Company. The hedge funds invest in a wide range of securities and financial assets either directly or through intermediaries. The funds allocate gains, losses and expenses to investors based on the ownership percentage as described in the respective fund agreements to determine the NAV. At December 31, 2025, the Plan had no future commitments for additional contributions to hedge fund investments.

Swap Contracts
The Plan's swap contracts are agreements with other parties that The Plan will be paid based on the return of a specific treasury bond. However, these contracts are not backed by the full faith and credit of the US Government. The contract's NAV is based on the agreed upon principal amount and return of the agreed upon security or reference rate and is a Level 2 investment. The purpose of the swap contracts is to manage duration and interest rate exposure in order to hedge a portion of the dollar duration of the related pension liability.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those estimated future payments, including lump sum distributions that are attributable under the Plan's provisions related to services rendered by the employees from the date of eligibility to the valuation date (beginning-of-year benefit information date). Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries; (b) beneficiaries of employees who have died; and (c) present employees or their beneficiaries. Benefits for retired and terminated employees or their beneficiaries are based on each former employee's credited service to his or her termination or retirement date. Accumulated plan benefits for current active employees are based on each employee's credited service preceding the valuation date. Benefits payable under all circumstances—retirement, death, disability and termination of employment—are included only to the extent that they are attributable to an employee's service prior to the valuation date.

Contributions

Cash contributions of Martin Marietta Materials, Inc. (the Company) are made in amounts sufficient to meet or exceed the Employee Retirement Income Security Act of 1974 (ERISA) minimum funding requirements. Such minimum funding requirements were exceeded for the years ended December 31, 2025 and 2024. For financial reporting purposes, contributions receivable are recorded at December 31 for contributions made in a succeeding year but deducted in the current year's federal income tax return.

Payment of Benefits

Benefit payments to participants are recorded upon distribution. No liability is recorded for distributions to participants who terminated during the year but have chosen to defer payments to a future year.

Administrative Expenses

The Plan's administrative expenses are paid by either the Plan or the Company, as provided by the Plan document. Certain administrative functions are performed by employees of the Company. No such employee receives compensation from the Plan.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Accordingly, actual results could differ from those estimates and assumptions.

2. Description of Plan

The following description of the Plan provides only general information. Participants should refer to the Plan document or summary plan description for a more complete description of the Plan's provisions.

The Plan, a defined benefit plan, provides for retirement income and pre-retirement death benefits for certain employees of the Company, and is subject to the provisions of ERISA. The Benefit Plan Committee of the Company controls and manages the operation and administration of the Plan. Northern Trust Corporation serves as the trustee of the Plan and, together with several investment managers, manages the Master Trust's investments.

Substantially all salaried and hourly employees of the Company meeting eligibility requirements may participate in the Plan.

A participant is fully vested upon the earlier of completing five years of vesting service or the participant's normal retirement date. After January 1, 1976, one year of vesting service requires one thousand or more hours of service during a consecutive twelve-month period beginning on the participant's date of hire and on every anniversary thereof. Effective November 1, 2001, salaried employees receive $^1/_{12}$ of a year's credit toward vesting service for each month in which they work one day. The normal retirement date is the later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

Each participant who retires on or after the normal retirement date shall become entitled to receive a normal retirement benefit as determined by the Plan. The Plan also provides for early retirement, pre-retirement surviving spouse and disability retirement benefits to participants that meet specific conditions as defined by the Plan document.

Participants whose employment terminates for any reason, other than death, after attaining vesting but before the employee's normal retirement date are entitled to a retirement benefit in an amount equal to the employee's retirement benefit accrued at termination of employment under the applicable benefit structure. Participants whose employment terminates before vesting are not entitled to any benefits under the Plan.

Although the Company expects to continue the Plan indefinitely, the Board of Directors of the Company may terminate the Plan for any reason at any time.

In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of Plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder, and the Plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (PBGC) if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC

at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty while other benefits may not be provided for at all.

3. Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

The effect of Plan amendments on accumulated plan benefits is recognized during the year in which such amendments become effective.

The actuarial present value of accumulated plan benefits as of December 31, 2024, as estimated by the actuary, is as follows (*in thousands*):

Vested accumulated benefits:	
Participants currently receiving payments	$ 419,545
Other participants	334,380
	753,925
Nonvested accumulated benefits	31,452
Total accumulated benefits	$ 785,377

Factors affecting the change in the actuarial present value of accumulated plan benefits are as follows *(in thousands)*:

Actuarial present value of accumulated plan benefits at January 1, 2024	$ 789,638
Increase (decrease) during the year attributable to:	
Benefits accumulated, actuarial gain/loss and increase for interest due to the decrease in the discount period	77,635
Benefits paid	(40,649)
Change in actuarial assumptions	(41,535)
Plan amendments	288
Net decrease	(4,261)
Actuarial present value of accumulated plan benefits at December 31, 2024	$ 785,377

Actuarial assumptions are based upon the Pri-2012 Base Mortality Table with the MP-2020 scale, assumed retirement age (based on rates varying by age from 5% probability at age 55 for salaried and 10% probability at age 55 for hourly to 100% probability by age 70 for both salaried and hourly) and a discount rate of 5.98% as of December 31, 2024 and 5.56% as of January 1, 2024.

The actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were terminated, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computation of the actuarial present value of accumulated plan benefits was made as of January 1, 2025. Had the valuation been calculated as of December 31, 2024, there would be no material difference.

4. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated January 9, 2014 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan has been amended since receiving the determination letter. The Company believes the Plan is being operated in compliance with the applicable requirements of the Code, and therefore, believes that the Plan is qualified and the related trust is tax exempt.

GAAP requires Plan management to evaluate tax positions taken by the Plan and to recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by a taxing authority. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

5. Master Trust

The Plan has a 100% interest in the Master Trust's net assets as of December 31, 2025 and 2024. An analysis of investments in the Master Trust is as follows:

	2025		
	Interest and Dividends	**Net Appreciation (Depreciation) in Fair Value During the Year**	**Fair Value at End of Year**
	(In Thousands)		
Investments at fair value:			
Common collective investment trusts	**$ 724**	**$157,754**	**$ 1,054,364**
Real estate funds	**7,804**	**(2,539)**	**134,576**
Private infrastructure fund	**3,499**	**10,327**	**99,932**
Government securities	**1,450**	**4,768**	**110,860**
Swap contracts	**7,666**	**(4,594)**	**(7,925)**
Hedge funds	**--**	**8**	**90**
Due from broker	**--**	**--**	**6,125**
	$ 21,143	**$165,724**	**$ 1,398,022**

	2024		
	Interest and Dividends	**Net Appreciation (Depreciation) in Fair Value During the Year**	**Fair Value at End of Year**
	(In Thousands)		
Investments at fair value:			
Common collective investment trusts	$ 671	$ 99,641	$ 949,149
Real estate funds	8,598	(7,824)	130,549
Private infrastructure fund	--	1,955	94,042
Government securities	1,030	(22,290)	61,401
Hedge funds	--	(578)	82
Due from broker	--	--	2,301
	$ 10,299	$ 70,904	$1,237,524

6. Investments with Fair Value Measured Using Level 1, Level 2 and NAV

The following table summarizes investments for which fair value is measured using Level 1, Level 2 and the NAV per share practical expedient:

	Fair Value measured at quoted prices in active markets for identical assets (Level 1)	**Significant Observable Inputs (Level 2)**	**Net Asset Value**
		2025	
		(In Thousands)	
Common Collective Investment Trusts (a)	**$ --**	**$ --**	**$ 1,054,364**
Real Estate Funds (b)	**$ --**	**$ --**	**$ 134,576**
Private Infrastructure Fund (c)	**$ --**	**$ --**	**$ 99,932**
Government Securities (a)	**$ 110,860**	**$ --**	**$ --**
Swap Contracts (e)	**$ --**	**$ (7,925)**	**$ --**
Hedge Funds (d)	**$ --**	**$ --**	**$ 90**

	Fair Value measured at quoted prices in active markets for identical assets (Level 1)	Net Asset Value
	2024(f)	
	(In Thousands)	
Common Collective Investment Trusts (a)	$ --	$ 949,149
Real Estate Funds (b)	$ --	$ 130,549
Private Infrastructure Fund (c)	$ --	$ 94,042
Government Securities (a)	$ 61,401	$ --
Hedge Funds (d)	$ --	$ 82

(a) There are no conditions or restrictions on redeeming any of the investments in Common Collective Investment Trusts or Government Securities.

(b) The purpose of the Real Estate Funds is to actively manage a core portfolio of primarily equity real estate investments located in the United States. The Plan may redeem units at NAV at the end of a calendar quarter, on at least 45 days written notice for the AEW Core Property Trust and for the CF Harrison Street Fund. The General Partner may decline to redeem all or any portion

of the Units held by the Investor at the General Partner's sole and absolute discretion. As of December 31, 2025, a full redemption has been put in for the UBS Trumball Property Fund.

(c) The infrastructure fund aims for attractive returns through investment in a worldwide diversified portfolio of high quality, mature, operating assets, primarily in the utility and transportation sectors. Units may be redeemed beginning 3 years after the initial investment on a semi-annual basis.

(d) The Hedge Funds' investment objective is to seek attractive risk-adjusted rates of return through investment in a diversified portfolio of assets. The Plan may redeem units in its Hedge Fund investment at NAV as of the last business day of each calendar quarter, on at least 60 days written notice. Units must be redeemed in increments of $100,000. The Hedge Fund's ability to satisfy a redemption request is dependent on the Hedge Fund's Board of Trustees affecting a tender offer.

(e) The Plan's swap contracts are agreements with other parties that The Plan will be paid based on the return of a specific treasury bond. These contracts are not backed by the full faith and credit of the US Government. There is a breakage fee associated with the early termination of the contracts that varies from swap to swap.

(f) There were no Level 2 investments reported in 2024.

At December 31, 2025 and 2024, the Plan did not hold any investments that were required to be reported in Level 3 in the fair value hierarchy.

7. Party-in-Interest Transactions

Certain Plan investments are managed by the Trustee, as defined by the Plan, and, therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for trustee and investment management services were approximately $4,067,000, or 0.29% of net assets available for benefits, and $2,211,000, or 0.18% of net assets available for benefits, for the years ended December 31, 2025 and 2024, respectively.

The Plan paid other expenses related to the Plan operations and investment activity to various service providers. These transactions qualify as exempt party-in-interest transactions under ERISA.

8. Risks and Uncertainties

The Plan invests in various investment securities, which are exposed to various systematic risks such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption processes, it is at least reasonably possible that changes in these estimates and

assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

9. Subsequent Events

The Company has evaluated subsequent events through October 13, 2026, the date on which the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

Martin Marietta Pension Plan

EIN: 56-1848578 Plan Number: 002

Schedule H, Line 4i – Schedule of Assets
(Held at End of Year)

December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
			(In Thousands)	
*	Interest in Master Trust	Martin Marietta Materials, Inc. Defined Benefit Plans Master Retirement Trust	$ 893,034	$1,398,022

* Indicates party-in-interest to the Plan.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data for Salaried Employees as of January 1, 2025

Salaried number and average plan compensation limited by IRC §401(a)(17) distributed by attained age and attained years of credited service

	Attained Years of Credited Service[1]										
Attained Age	**Under 1**	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40 & Over**	**Total**
Under 25	40	53	1	0	0	0	0	0	0	0	94
	69,842	82,926	-	-	-	-	-	-	-	-	77,718
25-29	30	119	39	0	0	0	0	0	0	0	188
	95,937	94,523	107,602	-	-	-	-	-	-	-	97,462
30-34	34	110	79	20	0	0	0	0	0	0	243
	102,489	108,616	118,772	115,257	-	-	-	-	-	-	111,607
35-39	31	95	78	50	8	0	0	0	0	0	262
	106,361	125,482	124,103	132,099	-	-	-	-	-	-	125,114
40-44	22	103	85	66	33	21	1	0	0	0	331
	133,115	135,371	150,556	132,635	147,056	139,895	-	-	-	-	140,125
45-49	19	91	91	78	25	24	24	1	0	0	353
	-	140,640	137,408	140,609	146,111	143,680	119,328	-	-	-	137,723
50-54	40	83	83	79	22	22	19	10	1	0	359
	109,313	140,931	130,266	132,562	121,356	175,933	-	-	-	-	135,769
55-59	20	69	69	70	18	24	20	18	13	3	324
	151,788	140,014	122,398	143,662	-	164,270	170,687	-	-	-	144,730
60-64	11	47	38	48	14	17	25	15	20	2	237
	-	121,320	145,710	134,851	-	-	143,642	-	140,328	-	134,723
65-69	5	11	13	12	2	5	1	2	5	1	57
	-	-	-	-	-	-	-	-	-	-	126,093
70 & over	1	6	2	4	0	2	2	0	1	1	19
	-	-	-	-	-	-	-	-	-	-	-
Total	253	787	578	427	122	115	92	46	40	7	2,467
	106,833	121,043	130,746	135,143	140,604	151,061	144,002	167,746	129,099	-	128,718

[1] Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data for Hourly Employees as of January 1, 2025

Hourly number distributed by attained age and attained years of credited service

	Attained Years of Credited Service[1]										
Attained Age	**Under 1**	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40 & Over**	**Total**
Under 25	245	364	16	0	0	0	0	0	0	0	625
25-29	134	449	157	5	0	0	0	0	0	0	745
30-34	141	405	229	49	0	0	0	0	0	0	824
35-39	98	311	177	77	22	3	0	0	0	0	688
40-44	79	283	154	75	37	12	0	0	0	0	640
45-49	66	242	143	81	34	22	8	0	0	0	596
50-54	70	213	133	89	43	37	15	1	2	0	603
55-59	46	194	113	129	35	39	28	21	10	1	616
60-64	29	168	132	122	33	33	24	18	23	11	593
65-69	15	39	39	41	10	16	5	7	5	15	192
70 & over	4	11	9	16	9	6	3	2	1	4	65
Total	927	2,679	1,302	684	223	168	83	49	41	31	6,187

[1] Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Statement of Actuarial Assumptions/Methods

Actuarial Assumptions and Methods

Economic Assumptions

Interest rate basis:

- Applicable month: September 2024
- Interest rate basis: Segment Rates

Interest rates:

	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	5.07%	5.07%
• Second segment rate	5.31%	5.33%
• Third segment rate	5.50%	5.36%
• Effective interest rate	5.39%	5.33%

Annual rates of increase

• Pensionable earnings (Salaried participants only)	4.50%
• Social Security wage base	4.00%
• Statutory limits on compensation	3.00%

Plan-related expenses $6,153,563; assumes ongoing expenses approximately equal to the total administrative expenses in the prior year.

As permitted by law, rates reflecting stabilization are used to determine the funding target and target normal cost, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates and may be inconsistent with other economic assumptions used in the valuation.

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

SCHEDULE SB ATTACHMENTS

Mortality

Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination

Rates varying by age and service.

Salaried Termination Rates			
Age	Service		
	0-2	2-5	5+
<54	.10	.05	.05
55+	.10	.05	.00

Hourly Termination Rates			
Age	Service		
	0-2	2-5	5+
<54	.20	.10	.10
55+	.20	.10	.00

Disability

Percentage becoming disabled during the year		
Salaried	Hourly	
None	Age	Rate
	25	.0003
	40	.0007
	55	.0036

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age.

Salaried Retirement Rates	
Age	Rate
55-57	.05
58-61	.10
62	.20
63-64	.15
65-69	.30
70	1.00

Hourly Retirement Rates	
Age	Rate
55-61	.10
62	.20
63-64	.15
65-69	.30
70	1.00

Benefit commencement date:

- Preretirement death benefit: The later of the death of the active participant or the date the participant would have attained age 55
- Deferred vested benefit: Actives: The later of age 65 or termination of employment
  TVs (non-RCC): The later of age 65 or current age, if older
  TVs (former RCC): The later of SSNRA or current age, if older
- Disability benefit: Upon disablement
- Retirement benefit: Upon termination of employment

Form of payment

Single participants are assumed to elect a single life annuity; married participants are assumed to elect a 50% joint & survivor annuity

Percent married

Salaried: 75% of males; 40% of females.
Hourly: 60% of males; 20% of females.

Spouse age

Wife two years younger than husband.

Covered pay

Prior year's pensionable earnings plus assumed increase (with adjustment to assume 125% of target bonuses are paid in the future)

SCHEDULE SB ATTACHMENTS

Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of fair value, including contributions receivable (discounted using the effective interest rate for the prior plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued.

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

The plan sponsor, furnished participant data as of January 1, 2025. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with Martin Marietta, the following assumptions were made for missing or apparently inconsistent data elements were made:

- For retirees who elected a J&S benefit, but who have no beneficiary information in data, the valuation assumption of wives 2 years younger than husbands is used.
- For terminated vested participants missing an accrued benefit in the data, the amount used in the prior valuation is used. If this amount is unavailable, an estimated TV benefit is used.
- Participants that do not have Hourly or Salaried indicator are assumed to be Salaried.
- For active Salaried participants missing annual earnings for the prior year, the annualized rate of pay is used.
- For active participants missing a credited service amount, credited service is calculated using their adjusted service date.
- For active participants missing a vesting service amount, credited service is used.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
MARTIN MARIETTA PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
MARTIN MARIETTA MATERIALS, INC.

D Employer Identification Number (EIN)
56-1848578

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	1,260,491,273
b Actuarial value	**2b**	1,228,305,030

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	4,893	438,759,856	438,759,856
b For terminated vested participants	2,724	84,877,853	84,877,853
c For active participants	8,654	281,593,751	316,105,938
d Total	16,271	805,231,460	839,743,647

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.39%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	37,402,940
b Expected plan-related expenses	**6b**	6,153,563
c Target normal cost	**6c**	43,556,503

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE William M DeGothseir WMD — 8/18/2026

Signature of actuary — Date

William M DeGothseir — 2607985

Type or print name of actuary — Most recent enrollment number

Willis Towers Watson US LLC — 215-246-6000

Firm name — Telephone number (including area code)

PO Box 674401

Houston TX 77267

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	211,554,256
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	211,554,256
10	Interest on line 9 using prior year's actual return of 6.85%	0	14,491,467
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		22,967,675
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.21%		1,196,616
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		24,164,291
	d Portion of (c) to be added to prefunding balance		24,164,291
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	250,210,014

Part III Funding Percentages

14	Funding target attainment percentage	14	116.47 %
15	Adjusted funding target attainment percentage	15	146.27 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	124.82 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
5.07 %	5.31 %	5.50 %	

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	61

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	43,556,503
b Excess assets, if applicable, but not greater than line 31a	**31b**	43,556,503

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

Salaried Retirement Rates are as follows:

Age	Rate
55	5%
56	5%
57	5%
58	10%
59	10%
60	10%
61	10%
62	20%
63	15%
64	15%
65	30%
66	30%
67	30%
68	30%
69	30%
70	100%

The average retirement age was calculated as follows:

(a) Age	(b) Retirement Decrement	(c) Population Beg of Year	(d) Population End of Year	(e) Number Retired	(f) [(a) * (e)] / 1000
55	5%	1000.0	950.0	50.0	2.8
56	5%	950.0	902.5	47.5	2.7
57	5%	902.5	857.4	45.1	2.6
58	10%	857.4	771.6	85.7	5.0
59	10%	771.6	694.5	77.2	4.6
60	10%	694.5	625.0	69.4	4.2
61	10%	625.0	562.5	62.5	3.8
62	20%	562.5	450.0	112.5	7.0
63	15%	450.0	382.5	67.5	4.3
64	15%	382.5	325.1	57.4	3.7
65	30%	325.1	227.6	97.5	6.3
66	30%	227.6	159.3	68.3	4.5
67	30%	159.3	111.5	47.8	3.2
68	30%	111.5	78.1	33.5	2.3
69	30%	78.1	54.6	23.4	1.6
70	100%	54.6	0.0	54.6	3.8
A. Average Salaried Age at Retirement					62.4
B. Percentage of Salaried Participants					28.5%

Plan Name:	Martin Marietta Pension Plan
EIN / PN:	56 -1848578/002
Plan Sponsor:	Martin Marietta Materials, Inc.
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Hourly Retirement Rates are as follows:

Age	Rate
55	10%
56	10%
57	10%
58	10%
59	10%
60	10%
61	10%
62	20%
63	15%
64	15%
65	30%
66	30%
67	30%
68	30%
69	30%
70	100%

The average retirement age was calculated as follows:

(a) Age	(b) Retirement Decrement	(c) Population Beg of Year	(d) Population End of Year	(e) Number Retired	(f) [(a) * (e)] / 1000
55	10%	1000.0	900.0	100.0	5.5
56	10%	900.0	810.0	90.0	5.0
57	10%	810.0	729.0	81.0	4.6
58	10%	729.0	656.1	72.9	4.2
59	10%	656.1	590.5	65.6	3.9
60	10%	590.5	531.4	59.0	3.5
61	10%	531.4	478.3	53.1	3.2
62	20%	478.3	382.6	95.7	5.9
63	15%	382.6	325.2	57.4	3.6
64	15%	325.2	276.5	48.8	3.1
65	30%	276.5	193.5	82.9	5.4
66	30%	193.5	135.5	58.1	3.8
67	30%	135.5	94.8	40.6	2.7
68	30%	94.8	66.4	28.4	1.9
69	30%	66.4	46.5	19.9	1.4
70	100%	46.5	0.0	46.5	3.3
C. Average Hourly Age at Retirement					61.0
D. Percentage of Hourly Participants.					71.5%

Unrounded Weighted Average Retirement Age is [(A * B) + (C * D)] 61.4

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Actuarial Assumptions and Methods

Economic Assumptions

Interest rate basis:

- Applicable month: September 2024
- Interest rate basis: Segment Rates

Interest rates:

	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	5.07%	5.07%
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SCHEDULE SB ATTACHMENTS

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Percentage becoming disabled during the year

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SCHEDULE SB ATTACHMENTS

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SCHEDULE SB ATTACHMENTS

Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month.

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Valuation date	First day of plan year
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Benefits not valued	All benefits described in the Plan Provisions section of this report were valued.

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

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- Participants that do not have Hourly or Salaried indicator are assumed to be Salaried.
- For active Salaried participants missing annual earnings for the prior year, the annualized rate of pay is used.
- For active participants missing a credited service amount, credited service is calculated using their adjusted service date.
- For active participants missing a vesting service amount, credited service is used.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Plan Provisions for Certain Hourly Employees

The most recent amendment reflected in the following plan provisions was effective February 1, 2024.

Covered Employees — All hourly paid employees of Martin Marietta, excluding employees participating in multi-employer plans or employed at locations not participating in this plan.

Participation Date — Date of becoming a covered employee.

Definitions

Hours of Service — Each hour for which the employee is either directly or indirectly paid for duties performed. Additional hours credited for periods of sick leave, holidays and vacation for which the employee is paid.

Credited Service — Credited Service shall be credited at the following rates:

Number of Hours of Service during a calendar year	Credited Service for such year
1,700 or more	1 year
1,511-1,699	9/10 year
1,322-1,510	8/10 year
1,133-1,321	7/10 year
1,000-1,132	6/10 year
850-999	5/10 year
680-849	4/10 year
450-679	3/10 year
less than 450	None

Vesting Service — For periods prior to January 1, 1976, Vesting Service shall be determined in the same manner as Credited Service.

For periods on or after January 1, 1976, Vesting Service shall be credited at the following rates:

Number of Hours of Service during a calendar year	Vesting Service for such year
1,000 or more	1 year
850-999	5/10 year
680-849	4/10 year
450-679	3/10 year
less than 450	None

SCHEDULE SB ATTACHMENTS

Normal retirement date (NRD)

The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

Normal retirement benefit

The monthly benefit of a participant shall be equal to the benefit amount at termination, multiplied by the number of full years and any fraction there of Credited Service.

The monthly benefit amount is $30.00 for active participants on/after April 29, 2022 ($17.00 before April 29, 2022), unless specified otherwise below:

Location	LOC code	Home Business Unit	Benefit
Blue Rock	342	46410	$10.00
Franklin Gravel	189	46202	30.00
Misc Ohio Dist-Dayton		46203	30.00
Xenia Gravel		46205	30.00
Spring Valley Cook Rd. S&G		46214	30.00
Ross S&G	457	46357	18.00
Kellogg Avenue	458	46358	30.00
Lynchburg	459	46359	18.00
Clinton Co. Limestone		46364	18.00
Middletown Slag	198	46306	25.00
Hamilton	186	46303	25.00
Fairfield	187	46304	25.00
Harrison	188	46305	25.00

Eligibility for Benefits

Normal retirement

Retirement on NRD.

Early retirement

Retirement before NRD and on or after both attaining age 55 and completing five years of Vesting Service. (For AAC Noncontributory Plan participants, requirement is age 62 and five years of service.)

Deferred vested

Termination for reasons other than death or retirement after completing five years of Vesting Service.

Disability retirement

Termination due to total and permanent disability after completing ten years of Credited Service

Preretirement surviving spouse benefit

Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

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Monthly Benefits paid Upon the Following Events

Normal retirement

Monthly pension benefit determined as of NRD

Early retirement

For RCC & Heritage Hourly participants and AAC Hourly participants who terminate on or after December 1, 2019, monthly pension benefit determined as of early retirement date, reduced 5.0% for each year before age 62. This 5% reduction factor shall be applicable for a participant with five years of Credited Service, and shall be reduced .1% for each additional year of Credited Service, but shall not become less than 2.5% per year.

For all AAC Noncontributory participants (regardless of termination date) and other hourly participants who terminate prior to December 1, 2019, monthly pension benefit determined as of early retirement date, reduced by the following factors prorated based on completed months of age at early retirement:

Age	RCC & Heritage Hourly	AAC Hourly	AAC Noncontributory
64	92.8%	92.8%	94%
63	85.6%	85.6%	88%
62	78.4%	78.4%	82%
61	71.2%	71.2%	N/A
60	64.0%	64.0%	N/A
59	59.5%	56.8%	N/A
58	57.5%	49.6%	N/A
57	55.5%	42.4%	N/A
56	53.5%	35.2%	N/A
55	51.5%	28.0%	N/A

Deferred vested

Monthly pension benefit payable at age 65, or as early as age 55 (for former AAC Noncontributory participants, age 62) if the participant had at least five years of Vesting Service at the date of termination.

Disability retirement

Unreduced monthly normal retirement benefit. Amount is doubled in first year. (For former AAC & Redland participants, provisions vary.)

Preretirement surviving spouse benefit

50% of the monthly benefit the participant would have received if he had retired on the first of the month preceding or coincident with his death and elected a Joint and 50% Survivor Annuity. If the participant was eligible to retire at the time of his death, the benefit is payable immediately. If the participant had at least five years of Vesting Service, but had not attained age 55, the benefit is payable as early as the date the participant would have attained age 55, reduced for early commencement. If the participant had less than five years of Vesting Service, the benefit is payable on the date the participant would have attained age 65.

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity • Ten year certain and life annuity • Fifteen year certain and life annuity • Social Security Level Income Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All the benefits and pay (for certain Redland Stone Hourly employees) for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

Additional Plan Provisions for Certain Redland Stone Hourly Employees

Eligibility	Redland Stone hourly employees hired prior to January 1, 2000.
Credited Service	Elapsed time in years and months since date of hire.
Average Earnings	Highest five consecutive years of total compensation out of the last ten years.
Accrued Benefit	1% times Average Earnings up to covered compensation plus 1.65% times Average Earnings over covered compensation times Credited Service up to 35 years.
Early Retirement	Eligible at age 55 with five years of Vesting Service. Accrued Benefit is reduced by 1/180 for each of the first 60 months and 1/360 for each of the next 60 months that commencement precedes age 65.

SCHEDULE SB ATTACHMENTS

Deferred Vested

Eligible at age 55 with five years of Vesting Service. If terminated before attaining age 55, the benefit payable is equal to the Actuarial Equivalent value of the Accrued Benefit payable at the Normal Retirement Date.

Plan Provisions for Magnesia Specialties Division Hourly Employees

The most recent amendment reflected in the following plan provisions was effective June 1, 2022.

Covered Employees

Hourly paid employees of Martin Marietta Magnesia Specialties division who are represented by a collective bargaining agreement.

Participation Date

Date of becoming a covered employee.

Definitions

Hour of service

Each hour for which the employee is directly or indirectly paid by the employing company for duties performed.

Additional hours for periods of sick leave, holidays, jury duty and vacation for which the employee is paid.

Credited service

Number of hours of service during a calendar year	Credited service for such year
1,700 or more	1 year
1,511 but not 1,700	9/10 year
1,322 but not 1,511	8/10 year
1,133 but not 1,322	7/10 year
1,000 but not 1,133	6/10 year
850 but not 1,000	5/10 year
680 but not 850	4/10 year
450 but not 680	3/10 year
Less than 450	None

A 30-year cap on credited service applies to Midland Plant participants.

Vesting service

Number of hours of service during a calendar year	Vesting service for such year
1,000 or more	1 year
850 but not 1000	5/10 year
680 but not 850	4/10 year
450 but not 680	3/10 year
Less than 450	None

Normal retirement date (NRD)

The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

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Monthly pension benefit

The monthly benefit of a participants shall be equal to the benefit level at termination multiplied by the number of full years and any fraction thereof credited service.

The monthly benefit amount is $30.00 for active participants on/after April 29, 2022 ($17.00 before April 29, 2022), unless specified otherwise below:

Location Level	LOC #	Home Business Unit	Benefit
Manistee	14	33601	
pre 8/5/03			23.00
as of 8/5/03			25.00
as of 8/5/07			26.00
Woodville	5, 87	46601, 46602, 46603	
as of 6/1/96			21.50
6/1/97			22.00
6/1/98			22.50
6/1/99			23.00
6/1/01			24.00
6/1/03			25.00
6/1/06			26.00
6/1/22			30.00

Eligibility for Benefits

Normal retirement

Retirement on NRD.

Early retirement

Retirement before NRD and completing five years of Vesting Service and

(i) if he is an employee of the Manistee Plant or Woodville Plant Refractories Division he shall have attained age 55, or

(ii) if he is an employee of the Midland Plant Refractories Division he shall have attained age 62.

Deferred vested

Termination for reasons other than death or retirement after completing five years of Vesting Service.

Disability

Termination due to total and permanent disability after completing ten years of Credited Service.

Preretirement surviving spouse benefit

Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

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Monthly Benefits Paid Upon the Following Events	
Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 1/2% for each month by which commencement precedes NRD. Participants at the Manistee Plant are entitled to unreduced retirement benefits after attaining age 62 with 30 years of service.
Deferred vested	Monthly pension benefit payable at age 65, or as early as age 55 in an actuarially reduced amount if the participant had at least five years of Vesting Service at the date of termination.
Disability retirement	Unreduced monthly normal retirement benefit offset by Worker's Compensation or other company provided disability benefit.
Preretirement surviving spouse benefit	50% of the monthly benefit the participant would have received if he had retired on the first of the month preceding or coincident with his death and elected a Joint and 50% Survivor Annuity. If the participant was eligible to retire at the time of his death, the benefit is payable immediately. If the participant had at least five years of Vesting Service, but not attained age 55, the benefit is payable as early as the date the participant would have attained age 55, reduced for early commencement

Other Plan Provisions	
Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All benefits for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

SCHEDULE SB ATTACHMENTS

Plan Provisions for Salaried Employees

The most recent amendment reflected in the following plan provisions was effective December 9, 2010.

Covered Employees — All regular salaried employees of Martin Marietta.

Participation Date — Date of becoming a covered employee.

Definitions

Vesting Service:

- Post-November 1, 2001: 1/12 year of Vesting Service is earned for each month in which the employee has one Hour of Service.

- Pre-November 1, 2001: During each twelve-consecutive-month period beginning on the participant's date of hire, Vesting Service shall be credited as follows.

Hours of service	Vesting service
1,000 or more	1 year
866-999	5/12 year
693-865	4/12 year
519-692	3/12 year
346-518	2/12 year
173.33-345	1/12 year
less than 173.33	none

Credited Service — Years and months of service as a covered employee from date of hire or in some cases, date of acquisition.

Pensionable Pay — Total compensation including overtime, shift differential, lump sum merit payments, incentive awards paid in cash or deferred and any employee contributions made to the Martin Marietta Savings and Investment Plan, excluding imputed income and other fringe benefits

Average Earnings — The average of the highest five consecutive and complete calendar years of Pensionable Pay during the ten-year period ending on the earlier of the participant's termination or retirement date.

Social Security Covered Compensation — The average of the taxable wage bases in effect for each calendar year during the 35-year period ending in the year in which the participant attains Social Security retirement age.

Normal retirement date (NRD) — The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

SCHEDULE SB ATTACHMENTS

Monthly pension benefit	As of any date, one-twelfth of the sum of (i) plus (ii) multiplied by (iii) plus (iv) below: (i) 1.165% of final Average Earnings up to Social Security Covered Compensation. (ii) 1.5% of final Average Earnings in excess of Social (iii) Credited Service up to 35 years. (iv) 1.5% of final Average Earnings multiplied by Credited Service in excess of 35 years.

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of Vesting Service.
Postponed retirement	Retirement after NRD.
Deferred vested	Termination for reasons other than death or retirement after completing five years of Vesting Service.
Preretirement surviving spouse	Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

Monthly Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 5.0% for each year before age 62. This 5% reduction factor shall be applicable for a participant with five years of Credited Service, and shall be reduced .1% for each additional year of Credited Service, but shall not become less than 2.5% per year.
Postponed retirement	Monthly pension benefit determined as of actual retirement date.
Deferred vested	Monthly pension benefit payable at age 65 or as early as age 55 reduced for early commencement from age 65 by a factor as described above, or age 62 if termination date occurred on or after age 55.

SCHEDULE SB ATTACHMENTS

Preretirement surviving spouse benefit	If death occurs while in active status, benefit payable as early as the date the participant would have been eligible for early retirement. The benefit payable to the surviving spouse is the greater of 75% of the benefit accrued to the date of death reduced by the early retirement and joint and survivor factors or 50% of the benefit accrued to the date of death. In addition, a lump sum payment equal to one times base salary is payable, subject to IRS limits. If death occurs while in vested termination status, benefit payable as early as the date the participant would have been eligible for early retirement. The benefit payable to the surviving spouse is 50% of the benefit accrued to the date of death reduced by the early retirement and joint and survivor factors.

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity • Ten year certain and life annuity • Fifteen year certain and life annuity • Social Security Level Income • Lump sum benefit for certain AAC RIP participants Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

SCHEDULE SB ATTACHMENTS

Plan Provisions for former Riverside Cement Company Pension Plan participants

The most recent amendment reflected in the following plan provisions was effective January 1, 2013.

Covered employees

Effective January 1, 2004 the plan was frozen except for employees at Oro Grande covered by a collective bargaining agreement. Former employees have a frozen accrued benefit determined as of January 1, 2004. Effective June 24, 2007, no new hires will be eligible to participate in the plan. The plan was frozen to all employees after December 31, 2012.

Participation date

January 1 or July 1 after completing 1,000 hours in first employment year.

Definitions

Vesting service

One year for each 1,000-hour calendar year of employment by Martin Marietta after the initial service date.

Pension service

After 1975, one full year for each 2,080-hour calendar year of employment after the initial service date. For years with less than 2,080 hours of employment, pension service is prorated. Prior to 1976, service is granted based on elapsed time.

Pensionable pay

W-2 earnings less any bonuses, stock options, or severance pay, annualized on the basis of 2,080 hours for hourly employees. Bonuses are then added back to the total annualized amount to get pensionable pay.

Average earnings

The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on the earlier of the participant's termination date or retirement date.

Social Security benefit

The 35-year average of Social Security wage bases ending in the year of Social Security Retirement Age.

Normal retirement date (NRD)

First of month coinciding with or next following the attainment of age 65 with five years of vesting service or the fifth anniversary of plan participation.

Social Security retirement date (SSRD)

First day of month coincident with or next following the date the participant attains the age set forth in the following table:

Year of Participant's Birth	Age (SSRA)
Prior to 1938	65
1938 to 1954	66
1955 or after	67

SCHEDULE SB ATTACHMENTS

Monthly pension benefit	As of any date, one-twelfth of the total of 1.1% of average earnings up to covered compensation for up to 35 years of pension service, plus 1.6% of average earnings over covered compensation for up to 35 years of pension service, plus 1.1% of average earnings for each year in excess of 35 years.
Monthly preretirement spouse benefit	100% of the monthly pension benefit as of the date of death, reduced for the 100% joint and survivor election and reduced for payment on the participant's earliest retirement date.

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service
Disability	Termination due to total and permanent disability after completion of 5 or more years of vesting service.
Death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD, reduced 6% each year the NRD is prior to the SSRD, unless the participant has 25 or more years of vesting service.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 6.0% for each year of payment before the participant's SSRD. If a participant has 25 or more years of vesting service, then there will be no reduction for the first 3 years prior to the SSRA, and 2% shall replace 6% as the applicable reduction factor for each year back to age 60.
Late retirement	Monthly pension benefit determined as of actual retirement date. Reduced if payments start before participant's SSRD.
Vested termination	Monthly pension benefit determined as of termination date, reduced in the same manner as for early retirement for each month of payment before the participant's SSRD.

SCHEDULE SB ATTACHMENTS

Disablement	A totally and permanently disabled participant with 5 or more years of vesting service will receive a monthly pension benefit for life at SSRD calculated in the same manner as for normal retirement using anticipated service at SSRD. A disabled participant with 10 or more years of vesting service may elect a monthly pension benefit calculated in the same manner as for early retirement, unreduced for immediate commencement and continuing for life, providing the participant remains disabled to SSRD.
Death benefit	Monthly preretirement spouse benefit is payable to spouse for life starting at earliest retirement date providing the participant has completed 5 or more years of vesting service, or has terminated with a vested benefit and benefits had not commenced.
Minimum benefit	Any participant at January 1, 1976 or July 1, 1990 is entitled to a minimum benefit as of that date calculated based upon prior plan provisions in effect on December 31, 1975 and June 30, 1990, respectively. In no event will the benefits payable to a participant be less than the benefit that can be provided by his/her contributions to the plan plus any interest at the rate of 3.5% per year before January 1, 1976, 5% per year for years 1976 to 1986, and at a rate redetermined annually in accordance with the provisions of the Omnibus Budget Reconciliation Act of 1987 for years 1987 and after.
Qualified joint and survivor option	If a married participant retires under normal, early, disability, or deferred vested retirement provisions and does not elect to the contrary in writing, his/her benefit will be paid under the terms of the qualified joint and survivor option. Under this option, the participant will receive a reduced pension payable for his/her life with payments in the amount of 100% of such reduced pension will be continued after his/her death to his/her spouse for the spouse's lifetime.

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity

- Ten year certain and life annuity
- Fifteen year certain and life annuity
- Social Security Level Income

Mandatory lump sum if the present value of the total benefit does not exceed $7,000.

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Changes in Benefits Valued

The AAC Hourly Benefit Formula rate was increased from $24 to $25 per year of service for active eligible participants under the new collective bargaining agreement effective February 1, 2024. The S-Tx division was also divested as of February 9, 2024 with immediate vesting provided to certain participants. Additionally, the plan was amended in March 2024 to increase the mandatory small benefit cashout threshold from $5,000 to $7,000, effective January 1, 2024.

There have been no other changes in plan provisions since the prior valuation.

Future Plan Changes

No future plan changes were recognized in determining funding requirements.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data for Salaried Employees as of January 1, 2025

Salaried number and average plan compensation limited by IRC §401(a)(17) distributed by attained age and attained years of credited service

	Attained Years of Credited Service[1]										
Attained Age	**Under 1**	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40 & Over**	**Total**
Under 25	40	53	1	0	0	0	0	0	0	0	94
	69,842	82,926	-	-	-	-	-	-	-	-	77,718
25-29	30	119	39	0	0	0	0	0	0	0	188
	95,937	94,523	107,602	-	-	-	-	-	-	-	97,462
30-34	34	110	79	20	0	0	0	0	0	0	243
	102,489	108,616	118,772	115,257	-	-	-	-	-	-	111,607
35-39	31	95	78	50	8	0	0	0	0	0	262
	106,361	125,482	124,103	132,099	-	-	-	-	-	-	125,114
40-44	22	103	85	66	33	21	1	0	0	0	331
	133,115	135,371	150,556	132,635	147,056	139,895	-	-	-	-	140,125
45-49	19	91	91	78	25	24	24	1	0	0	353
	-	140,640	137,408	140,609	146,111	143,680	119,328	-	-	-	137,723
50-54	40	83	83	79	22	22	19	10	1	0	359
	109,313	140,931	130,266	132,562	121,356	175,933	-	-	-	-	135,769
55-59	20	69	69	70	18	24	20	18	13	3	324
	151,788	140,014	122,398	143,662	-	164,270	170,687	-	-	-	144,730
60-64	11	47	38	48	14	17	25	15	20	2	237
	-	121,320	145,710	134,851	-	-	143,642	-	140,328	-	134,723
65-69	5	11	13	12	2	5	1	2	5	1	57
	-	-	-	-	-	-	-	-	-	-	126,093
70 & over	1	6	2	4	0	2	2	0	1	1	19
	-	-	-	-	-	-	-	-	-	-	-
Total	253	787	578	427	122	115	92	46	40	7	2,467
	106,833	121,043	130,746	135,143	140,604	151,061	144,002	167,746	129,099	-	128,718

[1] Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a - Schedule of Active Participant Data for Hourly Employees as of January 1, 2025

Hourly number distributed by attained age and attained years of credited service

	Attained Years of Credited Service[1]										
Attained Age	**Under 1**	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40 & Over**	**Total**
Under 25	245	364	16	0	0	0	0	0	0	0	625
25-29	134	449	157	5	0	0	0	0	0	0	745
30-34	141	405	229	49	0	0	0	0	0	0	824
35-39	98	311	177	77	22	3	0	0	0	0	688
40-44	79	283	154	75	37	12	0	0	0	0	640
45-49	66	242	143	81	34	22	8	0	0	0	596
50-54	70	213	133	89	43	37	15	1	2	0	603
55-59	46	194	113	129	35	39	28	21	10	1	616
60-64	29	168	132	122	33	33	24	18	23	11	593
65-69	15	39	39	41	10	16	5	7	5	15	192
70 & over	4	11	9	16	9	6	3	2	1	4	65
Total	927	2,679	1,302	684	223	168	83	49	41	31	6,187

[1] Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b
Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	2,068,892	400,945	40,908,447	43,378,284
2026	4,974,303	871,312	40,050,800	45,896,415
2027	7,437,024	1,198,344	39,177,724	47,813,092
2028	9,725,920	1,524,344	38,263,249	49,513,513
2029	11,827,890	1,969,537	37,309,754	51,107,181
2030	13,716,130	2,551,781	36,298,082	52,565,993
2031	15,392,029	3,129,118	35,228,366	53,749,513
2032	16,932,363	3,661,089	34,127,975	54,721,427
2033	18,292,112	4,132,297	32,990,029	55,414,438
2034	19,435,009	4,584,012	31,771,416	55,790,437
2035	20,425,076	5,010,718	30,489,788	55,925,582
2036	21,336,979	5,516,606	29,179,141	56,032,726
2037	22,180,565	5,998,982	27,815,558	55,995,105
2038	22,920,365	6,347,218	26,411,289	55,678,872
2039	23,651,237	6,709,940	24,957,838	55,319,015
2040	24,324,914	7,083,405	23,471,728	54,880,047
2041	24,907,459	7,450,926	21,982,576	54,340,961
2042	25,509,825	7,707,022	20,479,808	53,696,655
2043	26,045,867	7,879,033	18,973,809	52,898,709
2044	26,428,055	8,046,853	17,475,447	51,950,355
2045	26,711,734	8,196,707	15,995,846	50,904,287
2046	26,939,883	8,335,859	14,546,089	49,821,831
2047	27,128,082	8,495,484	13,137,004	48,760,570
2048	27,202,469	8,603,205	11,778,983	47,584,657
2049	27,143,912	8,595,780	10,481,752	46,221,444
2050	26,976,667	8,525,023	9,254,270	44,755,960
2051	26,674,296	8,422,320	8,104,410	43,201,026

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2052	26,276,997	8,297,431	7,038,598	41,613,026
2053	25,824,583	8,170,253	6,061,472	40,056,308
2054	25,252,339	8,021,713	5,175,768	38,449,820
2055	24,595,579	7,828,541	4,382,187	36,806,307
2056	23,942,111	7,626,297	3,679,378	35,247,786
2057	23,218,104	7,399,684	3,064,190	33,681,978
2058	22,421,092	7,134,929	2,531,844	32,087,865
2059	21,613,422	6,845,472	2,076,364	30,535,258
2060	20,789,137	6,529,645	1,690,940	29,009,722
2061	19,918,078	6,185,573	1,368,253	27,471,904
2062	19,003,560	5,827,170	1,100,859	25,931,589
2063	18,063,549	5,466,571	881,448	24,411,568
2064	17,113,290	5,107,088	703,049	22,923,427
2065	16,166,162	4,754,606	559,216	21,479,984
2066	15,219,578	4,412,086	444,139	20,075,803
2067	14,279,521	4,078,725	352,692	18,710,938
2068	13,353,936	3,758,125	280,456	17,392,517
2069	12,443,981	3,451,248	223,676	16,118,905
2070	11,555,938	3,158,762	179,209	14,893,909
2071	10,696,114	2,881,109	144,463	13,721,686
2072	9,869,556	2,618,549	117,342	12,605,447
2073	9,079,951	2,371,213	96,160	11,547,324
2074	8,328,191	2,139,105	79,587	10,546,883

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

Salaried Retirement Rates are as follows:

Age	Rate
55	5%
56	5%
57	5%
58	10%
59	10%
60	10%
61	10%
62	20%
63	15%
64	15%
65	30%
66	30%
67	30%
68	30%
69	30%
70	100%

The average retirement age was calculated as follows:

(a) Age	(b) Retirement Decrement	(c) Population Beg of Year	(d) Population End of Year	(e) Number Retired	(f) [(a) * (e)] / 1000
55	5%	1000.0	950.0	50.0	2.8
56	5%	950.0	902.5	47.5	2.7
57	5%	902.5	857.4	45.1	2.6
58	10%	857.4	771.6	85.7	5.0
59	10%	771.6	694.5	77.2	4.6
60	10%	694.5	625.0	69.4	4.2
61	10%	625.0	562.5	62.5	3.8
62	20%	562.5	450.0	112.5	7.0
63	15%	450.0	382.5	67.5	4.3
64	15%	382.5	325.1	57.4	3.7
65	30%	325.1	227.6	97.5	6.3
66	30%	227.6	159.3	68.3	4.5
67	30%	159.3	111.5	47.8	3.2
68	30%	111.5	78.1	33.5	2.3
69	30%	78.1	54.6	23.4	1.6
70	100%	54.6	0.0	54.6	3.8
A. Average Salaried Age at Retirement					62.4
B. Percentage of Salaried Participants					28.5%

Plan Name:	Martin Marietta Pension Plan
EIN / PN:	56 -1848578/002
Plan Sponsor:	Martin Marietta Materials, Inc.
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Hourly Retirement Rates are as follows:

Age	Rate
55	10%
56	10%
57	10%
58	10%
59	10%
60	10%
61	10%
62	20%
63	15%
64	15%
65	30%
66	30%
67	30%
68	30%
69	30%
70	100%

The average retirement age was calculated as follows:

(a) Age	(b) Retirement Decrement	(c) Population Beg of Year	(d) Population End of Year	(e) Number Retired	(f) [(a) * (e)] / 1000
55	10%	1000.0	900.0	100.0	5.5
56	10%	900.0	810.0	90.0	5.0
57	10%	810.0	729.0	81.0	4.6
58	10%	729.0	656.1	72.9	4.2
59	10%	656.1	590.5	65.6	3.9
60	10%	590.5	531.4	59.0	3.5
61	10%	531.4	478.3	53.1	3.2
62	20%	478.3	382.6	95.7	5.9
63	15%	382.6	325.2	57.4	3.6
64	15%	325.2	276.5	48.8	3.1
65	30%	276.5	193.5	82.9	5.4
66	30%	193.5	135.5	58.1	3.8
67	30%	135.5	94.8	40.6	2.7
68	30%	94.8	66.4	28.4	1.9
69	30%	66.4	46.5	19.9	1.4
70	100%	46.5	0.0	46.5	3.3
C. Average Hourly Age at Retirement					61.0
D. Percentage of Hourly Participants.					71.5%

Unrounded Weighted Average Retirement Age is [(A * B) + (C * D)] 61.4

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b
Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	2,068,892	400,945	40,908,447	43,378,284
2026	4,974,303	871,312	40,050,800	45,896,415
2027	7,437,024	1,198,344	39,177,724	47,813,092
2028	9,725,920	1,524,344	38,263,249	49,513,513
2029	11,827,890	1,969,537	37,309,754	51,107,181
2030	13,716,130	2,551,781	36,298,082	52,565,993
2031	15,392,029	3,129,118	35,228,366	53,749,513
2032	16,932,363	3,661,089	34,127,975	54,721,427
2033	18,292,112	4,132,297	32,990,029	55,414,438
2034	19,435,009	4,584,012	31,771,416	55,790,437
2035	20,425,076	5,010,718	30,489,788	55,925,582
2036	21,336,979	5,516,606	29,179,141	56,032,726
2037	22,180,565	5,998,982	27,815,558	55,995,105
2038	22,920,365	6,347,218	26,411,289	55,678,872
2039	23,651,237	6,709,940	24,957,838	55,319,015
2040	24,324,914	7,083,405	23,471,728	54,880,047
2041	24,907,459	7,450,926	21,982,576	54,340,961
2042	25,509,825	7,707,022	20,479,808	53,696,655
2043	26,045,867	7,879,033	18,973,809	52,898,709
2044	26,428,055	8,046,853	17,475,447	51,950,355
2045	26,711,734	8,196,707	15,995,846	50,904,287
2046	26,939,883	8,335,859	14,546,089	49,821,831
2047	27,128,082	8,495,484	13,137,004	48,760,570
2048	27,202,469	8,603,205	11,778,983	47,584,657
2049	27,143,912	8,595,780	10,481,752	46,221,444
2050	26,976,667	8,525,023	9,254,270	44,755,960
2051	26,674,296	8,422,320	8,104,410	43,201,026

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2052	26,276,997	8,297,431	7,038,598	41,613,026
2053	25,824,583	8,170,253	6,061,472	40,056,308
2054	25,252,339	8,021,713	5,175,768	38,449,820
2055	24,595,579	7,828,541	4,382,187	36,806,307
2056	23,942,111	7,626,297	3,679,378	35,247,786
2057	23,218,104	7,399,684	3,064,190	33,681,978
2058	22,421,092	7,134,929	2,531,844	32,087,865
2059	21,613,422	6,845,472	2,076,364	30,535,258
2060	20,789,137	6,529,645	1,690,940	29,009,722
2061	19,918,078	6,185,573	1,368,253	27,471,904
2062	19,003,560	5,827,170	1,100,859	25,931,589
2063	18,063,549	5,466,571	881,448	24,411,568
2064	17,113,290	5,107,088	703,049	22,923,427
2065	16,166,162	4,754,606	559,216	21,479,984
2066	15,219,578	4,412,086	444,139	20,075,803
2067	14,279,521	4,078,725	352,692	18,710,938
2068	13,353,936	3,758,125	280,456	17,392,517
2069	12,443,981	3,451,248	223,676	16,118,905
2070	11,555,938	3,158,762	179,209	14,893,909
2071	10,696,114	2,881,109	144,463	13,721,686
2072	9,869,556	2,618,549	117,342	12,605,447
2073	9,079,951	2,371,213	96,160	11,547,324
2074	8,328,191	2,139,105	79,587	10,546,883

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Plan Provisions for Certain Hourly Employees

The most recent amendment reflected in the following plan provisions was effective February 1, 2024.

Covered Employees — All hourly paid employees of Martin Marietta, excluding employees participating in multi-employer plans or employed at locations not participating in this plan.

Participation Date — Date of becoming a covered employee.

Definitions

Hours of Service — Each hour for which the employee is either directly or indirectly paid for duties performed. Additional hours credited for periods of sick leave, holidays and vacation for which the employee is paid.

Credited Service — Credited Service shall be credited at the following rates:

Number of Hours of Service during a calendar year	Credited Service for such year
1,700 or more	1 year
1,511-1,699	9/10 year
1,322-1,510	8/10 year
1,133-1,321	7/10 year
1,000-1,132	6/10 year
850-999	5/10 year
680-849	4/10 year
450-679	3/10 year
less than 450	None

Vesting Service — For periods prior to January 1, 1976, Vesting Service shall be determined in the same manner as Credited Service.

For periods on or after January 1, 1976, Vesting Service shall be credited at the following rates:

Number of Hours of Service during a calendar year	Vesting Service for such year
1,000 or more	1 year
850-999	5/10 year
680-849	4/10 year
450-679	3/10 year
less than 450	None

Plan Name: Martin Marietta Pension Plan
EIN / PN: 56 -1848578/002
Plan Sponsor: Martin Marietta Materials, Inc.
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Normal retirement date (NRD)

The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

Normal retirement benefit

The monthly benefit of a participant shall be equal to the benefit amount at termination, multiplied by the number of full years and any fraction there of Credited Service.

The monthly benefit amount is $30.00 for active participants on/after April 29, 2022 ($17.00 before April 29, 2022), unless specified otherwise below:

Location	LOC code	Home Business Unit	Benefit
Blue Rock	342	46410	$10.00
Franklin Gravel	189	46202	30.00
Misc Ohio Dist-Dayton		46203	30.00
Xenia Gravel		46205	30.00
Spring Valley Cook Rd. S&G		46214	30.00
Ross S&G	457	46357	18.00
Kellogg Avenue	458	46358	30.00
Lynchburg	459	46359	18.00
Clinton Co. Limestone		46364	18.00
Middletown Slag	198	46306	25.00
Hamilton	186	46303	25.00
Fairfield	187	46304	25.00
Harrison	188	46305	25.00

Eligibility for Benefits

Normal retirement

Retirement on NRD.

Early retirement

Retirement before NRD and on or after both attaining age 55 and completing five years of Vesting Service. (For AAC Noncontributory Plan participants, requirement is age 62 and five years of service.)

Deferred vested

Termination for reasons other than death or retirement after completing five years of Vesting Service.

Disability retirement

Termination due to total and permanent disability after completing ten years of Credited Service

Preretirement surviving spouse benefit

Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

SCHEDULE SB ATTACHMENTS

Monthly Benefits paid Upon the Following Events

Normal retirement

Monthly pension benefit determined as of NRD

Early retirement

For RCC & Heritage Hourly participants and AAC Hourly participants who terminate on or after December 1, 2019, monthly pension benefit determined as of early retirement date, reduced 5.0% for each year before age 62. This 5% reduction factor shall be applicable for a participant with five years of Credited Service, and shall be reduced .1% for each additional year of Credited Service, but shall not become less than 2.5% per year.

For all AAC Noncontributory participants (regardless of termination date) and other hourly participants who terminate prior to December 1, 2019, monthly pension benefit determined as of early retirement date, reduced by the following factors prorated based on completed months of age at early retirement:

Age	RCC & Heritage Hourly	AAC Hourly	AAC Noncontributory
64	92.8%	92.8%	94%
63	85.6%	85.6%	88%
62	78.4%	78.4%	82%
61	71.2%	71.2%	N/A
60	64.0%	64.0%	N/A
59	59.5%	56.8%	N/A
58	57.5%	49.6%	N/A
57	55.5%	42.4%	N/A
56	53.5%	35.2%	N/A
55	51.5%	28.0%	N/A

Deferred vested

Monthly pension benefit payable at age 65, or as early as age 55 (for former AAC Noncontributory participants, age 62) if the participant had at least five years of Vesting Service at the date of termination.

Disability retirement

Unreduced monthly normal retirement benefit. Amount is doubled in first year. (For former AAC & Redland participants, provisions vary.)

Preretirement surviving spouse benefit

50% of the monthly benefit the participant would have received if he had retired on the first of the month preceding or coincident with his death and elected a Joint and 50% Survivor Annuity. If the participant was eligible to retire at the time of his death, the benefit is payable immediately. If the participant had at least five years of Vesting Service, but had not attained age 55, the benefit is payable as early as the date the participant would have attained age 55, reduced for early commencement. If the participant had less than five years of Vesting Service, the benefit is payable on the date the participant would have attained age 65.

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity • Ten year certain and life annuity • Fifteen year certain and life annuity • Social Security Level Income Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All the benefits and pay (for certain Redland Stone Hourly employees) for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

Additional Plan Provisions for Certain Redland Stone Hourly Employees

Eligibility	Redland Stone hourly employees hired prior to January 1, 2000.
Credited Service	Elapsed time in years and months since date of hire.
Average Earnings	Highest five consecutive years of total compensation out of the last ten years.
Accrued Benefit	1% times Average Earnings up to covered compensation plus 1.65% times Average Earnings over covered compensation times Credited Service up to 35 years.
Early Retirement	Eligible at age 55 with five years of Vesting Service. Accrued Benefit is reduced by 1/180 for each of the first 60 months and 1/360 for each of the next 60 months that commencement precedes age 65.

Deferred Vested

Eligible at age 55 with five years of Vesting Service. If terminated before attaining age 55, the benefit payable is equal to the Actuarial Equivalent value of the Accrued Benefit payable at the Normal Retirement Date.

Plan Provisions for Magnesia Specialties Division Hourly Employees

The most recent amendment reflected in the following plan provisions was effective June 1, 2022.

Covered Employees

Hourly paid employees of Martin Marietta Magnesia Specialties division who are represented by a collective bargaining agreement.

Participation Date

Date of becoming a covered employee.

Definitions

Hour of service

Each hour for which the employee is directly or indirectly paid by the employing company for duties performed.

Additional hours for periods of sick leave, holidays, jury duty and vacation for which the employee is paid.

Credited service

Number of hours of service during a calendar year	Credited service for such year
1,700 or more	1 year
1,511 but not 1,700	9/10 year
1,322 but not 1,511	8/10 year
1,133 but not 1,322	7/10 year
1,000 but not 1,133	6/10 year
850 but not 1,000	5/10 year
680 but not 850	4/10 year
450 but not 680	3/10 year
Less than 450	None

A 30-year cap on credited service applies to Midland Plant participants.

Vesting service

Number of hours of service during a calendar year	Vesting service for such year
1,000 or more	1 year
850 but not 1000	5/10 year
680 but not 850	4/10 year
450 but not 680	3/10 year
Less than 450	None

Normal retirement date (NRD)

The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

SCHEDULE SB ATTACHMENTS

Monthly pension benefit

The monthly benefit of a participants shall be equal to the benefit level at termination multiplied by the number of full years and any fraction thereof credited service.

The monthly benefit amount is $30.00 for active participants on/after April 29, 2022 ($17.00 before April 29, 2022), unless specified otherwise below:

Location Level	LOC #	Home Business Unit	Benefit
Manistee	14	33601	
pre 8/5/03			23.00
as of 8/5/03			25.00
as of 8/5/07			26.00
Woodville	5, 87	46601, 46602, 46603	
as of 6/1/96			21.50
6/1/97			22.00
6/1/98			22.50
6/1/99			23.00
6/1/01			24.00
6/1/03			25.00
6/1/06			26.00
6/1/22			30.00

Eligibility for Benefits

Normal retirement

Retirement on NRD.

Early retirement

Retirement before NRD and completing five years of Vesting Service and

(i) if he is an employee of the Manistee Plant or Woodville Plant Refractories Division he shall have attained age 55, or

(ii) if he is an employee of the Midland Plant Refractories Division he shall have attained age 62.

Deferred vested

Termination for reasons other than death or retirement after completing five years of Vesting Service.

Disability

Termination due to total and permanent disability after completing ten years of Credited Service.

Preretirement surviving spouse benefit

Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

SCHEDULE SB ATTACHMENTS

Monthly Benefits Paid Upon the Following Events	
Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 1/2% for each month by which commencement precedes NRD. Participants at the Manistee Plant are entitled to unreduced retirement benefits after attaining age 62 with 30 years of service.
Deferred vested	Monthly pension benefit payable at age 65, or as early as age 55 in an actuarially reduced amount if the participant had at least five years of Vesting Service at the date of termination.
Disability retirement	Unreduced monthly normal retirement benefit offset by Worker's Compensation or other company provided disability benefit.
Preretirement surviving spouse benefit	50% of the monthly benefit the participant would have received if he had retired on the first of the month preceding or coincident with his death and elected a Joint and 50% Survivor Annuity. If the participant was eligible to retire at the time of his death, the benefit is payable immediately. If the participant had at least five years of Vesting Service, but not attained age 55, the benefit is payable as early as the date the participant would have attained age 55, reduced for early commencement

Other Plan Provisions	
Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All benefits for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

SCHEDULE SB ATTACHMENTS

Plan Provisions for Salaried Employees

The most recent amendment reflected in the following plan provisions was effective December 9, 2010.

Covered Employees — All regular salaried employees of Martin Marietta.

Participation Date — Date of becoming a covered employee.

Definitions

Vesting Service:

- Post-November 1, 2001: 1/12 year of Vesting Service is earned for each month in which the employee has one Hour of Service.

- Pre-November 1, 2001: During each twelve-consecutive-month period beginning on the participant's date of hire, Vesting Service shall be credited as follows.

Hours of service	Vesting service
1,000 or more	1 year
866-999	5/12 year
693-865	4/12 year
519-692	3/12 year
346-518	2/12 year
173.33-345	1/12 year
less than 173.33	none

Credited Service — Years and months of service as a covered employee from date of hire or in some cases, date of acquisition.

Pensionable Pay — Total compensation including overtime, shift differential, lump sum merit payments, incentive awards paid in cash or deferred and any employee contributions made to the Martin Marietta Savings and Investment Plan, excluding imputed income and other fringe benefits

Average Earnings — The average of the highest five consecutive and complete calendar years of Pensionable Pay during the ten-year period ending on the earlier of the participant's termination or retirement date.

Social Security Covered Compensation — The average of the taxable wage bases in effect for each calendar year during the 35-year period ending in the year in which the participant attains Social Security retirement age.

Normal retirement date (NRD) — The later of the date the participant attains age 65 or the fifth anniversary of the participant's date of hire.

SCHEDULE SB ATTACHMENTS

Monthly pension benefit	As of any date, one-twelfth of the sum of (i) plus (ii) multiplied by (iii) plus (iv) below: (i) 1.165% of final Average Earnings up to Social Security Covered Compensation. (ii) 1.5% of final Average Earnings in excess of Social (iii) Credited Service up to 35 years. (iv) 1.5% of final Average Earnings multiplied by Credited Service in excess of 35 years.

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of Vesting Service.
Postponed retirement	Retirement after NRD.
Deferred vested	Termination for reasons other than death or retirement after completing five years of Vesting Service.
Preretirement surviving spouse	Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

Monthly Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 5.0% for each year before age 62. This 5% reduction factor shall be applicable for a participant with five years of Credited Service, and shall be reduced .1% for each additional year of Credited Service, but shall not become less than 2.5% per year.
Postponed retirement	Monthly pension benefit determined as of actual retirement date.
Deferred vested	Monthly pension benefit payable at age 65 or as early as age 55 reduced for early commencement from age 65 by a factor as described above, or age 62 if termination date occurred on or after age 55.

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Preretirement surviving spouse benefit	If death occurs while in active status, benefit payable as early as the date the participant would have been eligible for early retirement. The benefit payable to the surviving spouse is the greater of 75% of the benefit accrued to the date of death reduced by the early retirement and joint and survivor factors or 50% of the benefit accrued to the date of death. In addition, a lump sum payment equal to one times base salary is payable, subject to IRS limits. If death occurs while in vested termination status, benefit payable as early as the date the participant would have been eligible for early retirement. The benefit payable to the surviving spouse is 50% of the benefit accrued to the date of death reduced by the early retirement and joint and survivor factors.

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity • Ten year certain and life annuity • Fifteen year certain and life annuity • Social Security Level Income • Lump sum benefit for certain AAC RIP participants Mandatory lump sum if the present value of the total benefit does not exceed $7,000.
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are not assumed for determining contributions.

SCHEDULE SB ATTACHMENTS

Plan Provisions for former Riverside Cement Company Pension Plan participants

The most recent amendment reflected in the following plan provisions was effective January 1, 2013.

Covered employees

Effective January 1, 2004 the plan was frozen except for employees at Oro Grande covered by a collective bargaining agreement. Former employees have a frozen accrued benefit determined as of January 1, 2004. Effective June 24, 2007, no new hires will be eligible to participate in the plan. The plan was frozen to all employees after December 31, 2012.

Participation date

January 1 or July 1 after completing 1,000 hours in first employment year.

Definitions

Vesting service

One year for each 1,000-hour calendar year of employment by Martin Marietta after the initial service date.

Pension service

After 1975, one full year for each 2,080-hour calendar year of employment after the initial service date. For years with less than 2,080 hours of employment, pension service is prorated. Prior to 1976, service is granted based on elapsed time.

Pensionable pay

W-2 earnings less any bonuses, stock options, or severance pay, annualized on the basis of 2,080 hours for hourly employees. Bonuses are then added back to the total annualized amount to get pensionable pay.

Average earnings

The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on the earlier of the participant's termination date or retirement date.

Social Security benefit

The 35-year average of Social Security wage bases ending in the year of Social Security Retirement Age.

Normal retirement date (NRD)

First of month coinciding with or next following the attainment of age 65 with five years of vesting service or the fifth anniversary of plan participation.

Social Security retirement date (SSRD)

First day of month coincident with or next following the date the participant attains the age set forth in the following table:

Year of Participant's Birth	Age (SSRA)
Prior to 1938	65
1938 to 1954	66
1955 or after	67

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Monthly pension benefit	As of any date, one-twelfth of the total of 1.1% of average earnings up to covered compensation for up to 35 years of pension service, plus 1.6% of average earnings over covered compensation for up to 35 years of pension service, plus 1.1% of average earnings for each year in excess of 35 years.
Monthly preretirement spouse benefit	100% of the monthly pension benefit as of the date of death, reduced for the 100% joint and survivor election and reduced for payment on the participant's earliest retirement date.

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service
Disability	Termination due to total and permanent disability after completion of 5 or more years of vesting service.
Death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD, reduced 6% each year the NRD is prior to the SSRD, unless the participant has 25 or more years of vesting service.
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 6.0% for each year of payment before the participant's SSRD. If a participant has 25 or more years of vesting service, then there will be no reduction for the first 3 years prior to the SSRA, and 2% shall replace 6% as the applicable reduction factor for each year back to age 60.
Late retirement	Monthly pension benefit determined as of actual retirement date. Reduced if payments start before participant's SSRD.
Vested termination	Monthly pension benefit determined as of termination date, reduced in the same manner as for early retirement for each month of payment before the participant's SSRD.

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Disablement	A totally and permanently disabled participant with 5 or more years of vesting service will receive a monthly pension benefit for life at SSRD calculated in the same manner as for normal retirement using anticipated service at SSRD. A disabled participant with 10 or more years of vesting service may elect a monthly pension benefit calculated in the same manner as for early retirement, unreduced for immediate commencement and continuing for life, providing the participant remains disabled to SSRD.
Death benefit	Monthly preretirement spouse benefit is payable to spouse for life starting at earliest retirement date providing the participant has completed 5 or more years of vesting service, or has terminated with a vested benefit and benefits had not commenced.
Minimum benefit	Any participant at January 1, 1976 or July 1, 1990 is entitled to a minimum benefit as of that date calculated based upon prior plan provisions in effect on December 31, 1975 and June 30, 1990, respectively. In no event will the benefits payable to a participant be less than the benefit that can be provided by his/her contributions to the plan plus any interest at the rate of 3.5% per year before January 1, 1976, 5% per year for years 1976 to 1986, and at a rate redetermined annually in accordance with the provisions of the Omnibus Budget Reconciliation Act of 1987 for years 1987 and after.
Qualified joint and survivor option	If a married participant retires under normal, early, disability, or deferred vested retirement provisions and does not elect to the contrary in writing, his/her benefit will be paid under the terms of the qualified joint and survivor option. Under this option, the participant will receive a reduced pension payable for his/her life with payments in the amount of 100% of such reduced pension will be continued after his/her death to his/her spouse for the spouse's lifetime.

Other Plan Provisions

Actuarial Equivalence	Interest rate of 7% and the 83 GAM Table.
Forms of payment	Monthly pension benefits are paid as described above as a single life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of an actuarial equivalent 50% joint and survivor annuity or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms include: • 66 2/3% Joint and Survivor Annuity • 75% Joint and Survivor Annuity • 100% Joint and Survivor Annuity • Five year certain and life annuity

- Ten year certain and life annuity
- Fifteen year certain and life annuity
- Social Security Level Income

Mandatory lump sum if the present value of the total benefit does not exceed $7,000.

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Changes in Benefits Valued

The AAC Hourly Benefit Formula rate was increased from $24 to $25 per year of service for active eligible participants under the new collective bargaining agreement effective February 1, 2024. The S-Tx division was also divested as of February 9, 2024 with immediate vesting provided to certain participants. Additionally, the plan was amended in March 2024 to increase the mandatory small benefit cashout threshold from $5,000 to $7,000, effective January 1, 2024.

There have been no other changes in plan provisions since the prior valuation.

Future Plan Changes

No future plan changes were recognized in determining funding requirements.