FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287			
OTATEMENT OF OTATOLO IN BENEFICIAL OWNEROUS	Estimated average burden				

hours per response:

0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		f Reporting Person*							er or Tra olding		Symbol <u>C.</u> [LPL	A]		(Che	elationshipeck all app	,	ng Pers	son(s) to Is		
(Last)	, , , , , , , , , , , , , , , , , , , ,						3. Date of Earliest Transaction (Month/Day/Year) 03/26/2024									er (give title v)		Other (s below)	specify	
C/O LPL FINANCIAL HOLDINGS INC. 4707 EXECUTIVE DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street)	EGO C	A 9	2121					44.							Form Perso	filed by Mo	re thar	n One Repo	orting	
(City)	(S	tate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - Noi	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	osed of	, or	Ben	eficia	ly Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,			Transaction Disposed Of (E Code (Instr. 5)				es Acquired (A) Of (D) (Instr. 3, 4		Benefi Owned	ties cially I Following	Form (D) or	orm: Direct 0) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	nt (A) or		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(1115ti. 4)	
Common Stock 03/26/2					2024		A		6(1)	A		\$0	20	20,007		D				
		Tal									sed of, onvertib				/ Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiration (Month/I	on Da		7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		nstr.	s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
								Date	or Numb Expiration of		nber									

Explanation of Responses:

1. Represents stock units granted under the Issuer's 2021 Omnibus Equity Incentive Plan. Each stock unit represents the right to receive one share of common stock and is fully vested. The reporting person was previously granted stock units that were subject to a written deferral election under the Issuer's Non-Employee Director Deferred Compensation Plan (the "DDCP"), which stock units are fully vested as of the date hereof. The stock units reported hereby were credited to the reporting person's DDCP account in connection with a quarterly cash dividend that was paid on shares of common stock.

Remarks:

The signatory is signing on behalf of Paulett Eberhart pursuant to a Power of Attorney dated November 21, 2014.

/s/ Gregory M. Woods, 03/28/2024 attorney-in-fact

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.