FORM 3

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

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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

Name and Address of Reporting Person*     Khoury Joan D			. Date of Event Requiring Staten Month/Day/Year 05/01/2012	nent	3. Issue LPL						
(Last) C/O LPL INV	(First) ESTMENT HO	(Middle) OLDINGS INC.				ationship of Reporting Perso k all applicable) Director	10% Owne	er (I	5. If Amendment, Date of Original Filed (Month/Day/Year)		
ONE BEACON STREET, 22ND FLOOR					X	Officer (give title below)  MD, Chief Marketing	Other (specify below)  g Officer		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person		
(Street) BOSTON	MA	02108				, , , , , , , , , , , , , , , , , , , ,	9			y More than One	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
						ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi				se Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	,	Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

No securities are beneficially owned.

05/08/2012 /s/ Joan D. Khoury

\*\* 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 5 (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.