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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* SCHIFTER RICHARD P						2. Issuer Name and Ticker or Trading Symbol LPL Financial Holdings Inc. [LPLA]									eck all app	tor	ng Pei	10% O	wner
(Last)	,	irst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/29/2021 Officer (give title below) below) Other (specify below)													specify	
301 CON	4. If A	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) FORT W	ORTH T	X 7												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	tate) (2	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Exec if an	Deemed cution Date, ny nth/Day/Year)								Benefic	ties Fo cially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								v	Amount	(A) (D)	or	Price	Transa	action(s) 3 and 4)			(111501.4)		
Common	2021				A		1(1)	A		\$0	50,895.8345			D					
Common	2021				A		30 ⁽²⁾	I	A	\$0	50,925.83			D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of		6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code V		(A)		Date Exercisable		Expiration Date	Title	Amo or Num of Sha	ber					

Explanation of Responses:

- 1. Represents stock unit granted under the Issuer's 2021 Omnibus Equity Incentive Plan (the "2021 Plan"). The stock unit represents the right to receive one share of common stock and is scheduled to vest in full on May 17, 2022. 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 scheduled to vest in full on May 17, 2022. The stock unit reported hereby was credited to the reporting person's DDCP account in connection with a quarterly cash dividend that was paid on shares of common stock.
- 2. Represents stock units granted under the 2021 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 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 Richard P. Schifter pursuant to a Power of Attorney dated March 28, 2017.

/s/ Gregory M. Woods, attorney-in-fact

12/01/2021

** 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.