FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPROVAL | | | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | | | | | |
| l | Estimated average burden | | | | | | | | | | | | |
| l | 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

| Name and Address of Reporting Person* White George Burton | | | | | | 2. Issuer Name and Ticker or Trading Symbol LPL Financial Holdings Inc. [LPLA] | | | | | | | | | | all app | olicable) | | ssuer Owner (specify |
|---|---|----|--|-------------------|-------|--|---|--------|--|-------------|---------------------|---|----|------------------------------|--|-------------|---|---|--|
| (Last) (First) (Middle) C/O LPL FINANCIAL HOLDINGS INC. 75 STATE STREET, 22ND FLOOR | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/10/2016 | | | | | | | | | belov | | | v)`` |
| (Street) BOSTON MA 02109 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date | | | Transaction Dispos | | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | 4 and Sec Bei Ow | | ount of ities icially d Following ted | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | v | Amount | (<i>I</i> | A) or D) | Price | Tra | | ted action(s) 3 and 4) | | (Instr. 4) | | | |
| Common Stock 06/10/2 | | | | | | | | | F | | 230 | | D | \$24.75 | | 5 21,445(1) | | D | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution I urity or Exercise (Month/Day/Year) if any | | | Date, Transaction | | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or | nber | | | | | |

Explanation of Responses:

1. Consists of (i) 4,416 shares of Common Stock; (ii) 1,021 restricted stock units that vest in full on February 22, 2017; (iii) 867 restricted stock units that vest in full on February 24, 2017; (iv) 2,660 restricted stock units that vest ratably on March 6, 2017 and March 6, 2018; (v) 1,409 restricted stock units that will vest ratably on each of June 10, 2017 and June 10, 2018; (vi) 7,961 restricted stock units that vest ratably on each of February 25, 2017, February 25, 2018 and February 25, 2019; and (vii) 3,111 restricted stock units that vest in full on February 25, 2019.

Remarks:

The signatory is signing on behalf of George Burton White pursuant to a Power of Attorney dated August 11, 2015.

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

06/14/2016

** Signature of Reporting Person

Data

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.