## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHII				
	STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPR	ROVAL
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l	hours per response:	0.5

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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

1. Name and Address of Reporting Person*  RIEPE JAMES S						2. Issuer Name <b>and</b> Ticker or Trading Symbol  LPL Financial Holdings Inc. [ LPLA ]									heck all ap	ector	ng Perso	on(s) to Is	wner
		AL HOLDINGS	Middle) INC.			3. Date of Earliest Transaction (Month/Day/Year) 03/29/2019								Offi belo	cer (give title ow)	Other (spec below)			
75 STATE STREET, 22ND FLOOR  (Street)  BOSTON MA 02109  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X For For	,			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date					Execution Da  Day/Year) if any		execution Date,		Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd Secu Bene Owne	ficially ed Following	Form: (D) or I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or P		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 03/2				9/2019	/2019		А		8(1)		Α	\$(	)	91,933		D			
Common Stock 03			03/2	0/2019				A	A		22 <sup>(2)</sup> A		\$(	)	91,955		D		
Common Stock																35,971		I	By Stone Barn LLC
		Та	ıble II - C								sed of, onvertib				/ Owned	I			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Ye			Execution if any			ransaction ode (Instr.   C		of E		6. Date Exercis. Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbb		unt	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ow For Dir or I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code						Expiration Date								

## **Explanation of Responses:**

- 1. Represents stock units granted under the Issuer's Amended and Restated 2010 Omnibus Equity Incentive Plan (the "2010 Plan"). Each stock unit represents the right to receive one share of common stock and is scheduled to vest in full on May 7, 2019. 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 7, 2019. 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.
- 2. Represents stock units granted under the 2010 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 James S. Riepe pursuant to a Power of Attorney dated March 10, 2014.

/s/ Gregory M. Woods, 04/02/2019 attorney-in-fact

\*\* Signature of Reporting Person

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.