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	STATEMEN
Instruction 1(b).	Filed r

## T 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* <u>BERNARD EDWARD C</u>					2. Issuer Name and Ticker or Trading Symbol LPL Financial Holdings Inc. [ LPLA ]									(Che	eck all app X Direc	ationship of Reportir all applicable) Director		10% Ov	wner
(Last)	(Fi	rst) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/26/2024										Office below	er (give title /)		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 te)  X Form filed by One Reporting Person				.	
(Street) SAN DIEGO CA 92121					Form filed by More than One Report											orting			
(City)	(St		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.										nded to				
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or E	3ene	eficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					ay/Year) Exec		Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securiti Disposed 5)		es Acquired (A) o Of (D) (Instr. 3, 4		(A) or 3, 4 and	Benefic	ies cially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	or	Price	Transa	action(s) 3 and 4)			(Instr. 4)		
Common Stock 03/26/						/2024					5(1)	A	4	\$ <mark>0</mark>	13,555			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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo of (D (Instr	of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		nstr.	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y [0	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercisa	able	Expiration Date	or Numb of Title Share		.					

## **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 Edward C. Bernard pursuant to a Power of Attorney dated April 28, 2020.

/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.