FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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 OMB Number: 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* Larsen Sallie R. (Last) (First) (Middle) C/O LPL FINANCIAL HOLDINGS INC. 75 STATE STREET, 22ND FLOOR						2. Issuer Name and Ticker or Trading Symbol LPL Financial Holdings Inc. [LPLA] 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2018													Owner er (specify	
(Street) BOSTOI	N M	[A	02109 (Zip)		4. If										e) X Form t Form t					
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed	of, o	r Ben	eficial	ly Owned	i .				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, ar) if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Benefici Owned I	es ally Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	nmon Stock 02/23				/2018	/2018		A		2,296	(1)	A	\$0	19	9,453		D			
Common	Stock			02/25	/2018	В			F		523	3	D	\$65.5 18,930 ⁽²⁾				D		
		7									osed of				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4, Transactior Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		9	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	1	Amount or Number of Shares						
Option to purchase Common	\$65.5	02/23/2018			A		7,105		(3)		02/23/2028		nmon ock	7,105	\$0	7,105		D		

Explanation of Responses:

- 1. These shares represent restricted stock units. Each restricted stock unit represents a contingent right to receive one share of common stock on the applicable vesting date. These restricted stock units will vest ratably on each of February 23, 2019, February 23, 2020 and February 23, 2021. Vested shares will be issued to the reporting person as soon as practicable after the vesting date.
- 2. Consists of (i) 7,857 shares of Common Stock; (ii) 789 restricted stock units that vest in full on March 6, 2018; (iii) 711 restricted stock units that vest in full on March 6, 2018; (iv) 3,111 restricted stock units that vest in full on February 25, 2019; (v) 1,317 restricted stock units that vest in full on February 25, 2019; (vi) 2,849 restricted stock units that vest ratably on each of March 13, 2018, March 13, 2019 and March 13, 2020; and (vii) the restricted stock units reported on this Form 4.
- 3. This option becomes exercisable in three equal annual installments on each of February 23, 2019, February 23, 2020 and February 23, 2021.

Remarks:

The signatory is signing on behalf of Sallie R. Larsen pursuant to a Power of Attorney dated August 3, 2015.

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

02/27/2018

** 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.