Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | $D \subset$ | 20549 | |
|--------------|-------------|-------|--|
| vasilligion, | D.C. | 20349 | |

| STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|------------------------------------|------------------|
| | |

| OMB APF | PROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
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| hours per response | e: 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

| Name and Address of Reporting Person* WILSON ALAN D | | | | | 2. Issuer Name and Ticker or Trading Symbol PRICE T ROWE GROUP INC [TROW] | | | | | | | | | | | of Reportir licable) tor | ng Per | rson(s) to Is | |
|---|--|--|---------|-------------------------------------|---|---|--------|--|---------------|-------------------------|--------------------|--|---|--------------------|---|--|--------|--|---------------------------------------|
| (Last) | (Fii E PRICE G | rst) (t ROUP, INC. | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/30/2021 | | | | | | | | | | Office below | er (give title v) | | Other (below) | specify |
| 100 E. PRATT STREET | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | ′ I | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) BALTIM | IORE M | D 2 | 1202 | | | | | | | | | | X | Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | on-Deriva | tive S | Secui | rities | Acc | quirec | l, Dis | posed of | , or E | Benefi | cially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/ | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) | | | | and 5) Securi Benefi | | ities Foicially (Display (Disp | | | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pric | Trans | | action(s) 3 and 4) | | | (Instr. 4) |
| Common | Stock | | | 03/30/20 | 021 | | | | A | | 112.085(1) | A | . \$17 | 72.22 | 2 17,985.533 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu | eemed Ition Date, h/Day/Year) | | Fransaction of Code (Instr. Deriva | | vative crities crired r osed) r. 3, 4 | Expiration [| | ate | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Der Sec (Ins | rice of ivative urity tr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amour or Number of Shares | er | | | | | |

Explanation of Responses:

1. This is pursuant to the T. Rowe Price Group, Inc. 2017 Non-Employee Director Equity Plan with respect to dividends declared by the issuer on it's Common Stock. A portion of these shares were credited as fully-vested dividend reinvestment shares and a portion will be accrued and vest when the corresponding grant vests.

Remarks:

/s/ Power of Attorney Cheryl
L. Emory, Assistant Corporate 03/31/2021
Secretary.

** 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.