# SEC Form 4

# 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: 3235-0287 Estimated average burden hours per response: 0.5

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	t							
1. Name and Addre		0	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>PRICE T ROWE GROUP INC</u> [ TROW ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/27/2024	Director 10% Owner Officer (give title Other (specify below) below)							
100 E. PRATT \$	STREET		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)				Form filed by One Reporting Person							
BALTIMORE	MD	21202		Form filed by More than One Reporting Person							
(City)	(State)	(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.							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											

Table 1 Hen Bentalite Geodifice Acquirea, Bioposed el, el Benenelany enned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	06/27/2024		A		103.13(1)	A	\$115.43	24,510.3898	D	
Common Stock	06/28/2024		A		560 <sup>(2)</sup>	A	\$0.00	25,070.3898	D	

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			( 0 / 1	,	,			• •				,			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date ecurity or Exercise (Month/Day/Year) i				Transaction Code (Instr. 8)		mber rities rited r osed ) : 3, 4 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

### 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. These shares were credited as fully-vested dividend reinvestment shares.

2. Pursuant to the 2017 Non-Employee Director Equity Plan, Stock Units were issued for Director Fee Awards at \$115.31 per share, the closing price of TROW shares on June 28 2024. The Stock Unit Shares and any future dividends attributed to such Director Fee Award, will vest in full and become nonforfeitable on the date of grant.

### **Remarks:**

<u>Cheryl L. Emory, Assistant</u> <u>Corporate Secretary, POA for</u> <u>07/01/2024</u> <u>Wijnberg, Sandra S.</u>

\*\* 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.