## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer sul to Section 16. Form 4 or Form obligations may continue. See Instruction 1(b).	5
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* MacLellan Robert F.				Issuer Name <b>and</b> Ti RICE T ROW				(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)		Date of Earliest Trar 5/29/2023	nsaction	(Mont	h/Day/Year)		Director Officer (give title below)	10% ( Other below	(specify			
100 EAST PRA	TT STREET	4.	If Amendment, Date	of Origir	nal Fil	ed (Month/Day	6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BALTIMORE	MD						X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	R	Rule 10b5-1(c	:) Trar	nsad	ction Indi	n					
				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.									
	Т	able I - No	on-Derivative	e Securities Ac	quired	, Dis	sposed of,	or Be	neficially	y Owned			
Date		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	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	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock 06/29/20			06/29/2023		A		97.766 <sup>(1)</sup>	A	\$111.18	31,780.294	D		
Common Stock 06/30/20					A		581 <sup>(2)</sup>	A	\$0.00	32,361.294	D		

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

	(e.g., puts, cais, 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (II 8)		Number E		6. Date Exerc Expiration Da (Month/Day/N	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)	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 \$112.02 per share, the closing price of TROW shares on June 30, 2023. 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:

/s/ Power of Attorney Cheryl

<u>L Emory, Assistant Corporate</u> 07/03/2023 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.