FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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STATEMENT (OF CHAN	IGES IN BE	NEFICIAL	OWNERSHIP

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

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

Name and Address of Reporting Person* Hiebler Jessica M						2. Issuer Name and Ticker or Trading Symbol PRICE T ROWE GROUP INC [TROW]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last)	(F		(Middl	le)		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2024									X	Officer below)	(give title	ount	Other (s below)	specify		
100 E. P.	RATT STR	EET, BA-0320			4.											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BALTIN	IORE M	ID :	2120	2												X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		R	ule 1	0b5	-1(c) Tr	ansa	action Ind	dicati	on									
						Check satisfy	this bo	ox to ii firmati	ndicate ive defe	that a tr	ansaction was ditions of Rule	made pu 10b5-1(c	rsuar). Se	nt to a c ee Instru	ontrac ction 1	t, instruction	on or written	ı plan t	that is intende	ed to		
		Tab	le I -	Non-Deriv	vativ	e Sec	uritie	es A	cqui	red, [Disposed	of, or	Ber	nefici	ally	Owned	t					
Date		2. Transaction Date (Month/Day/Y	rear)	2A. Dee Execution if any (Month/		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or D Of (D) (Instr. 3, 4 and 5)		or Disp	osed	Securiti Benefic Owned	Securities Seneficially Dwned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D) Price		ce	Reporte Transac (Instr. 3		tion(s)			(Instr. 4)		
Common	Common Stock 02/09/2024		24				M		998	8 A \$77.		77.24	45	15,11	11.4905		D					
Common Stock 02/09/2024		24				M		140	A	\$	76.75	46	15,25	15,251.4905		D						
Common	Stock			02/09/202	24	ļ.			S		140	D	\$	107.12	288	15,111.4905			D			
Common	Stock			02/09/202	24	1			S	Ш	998	D	\$107.1288		8 14,113.4905			D				
Common	Stock			02/09/202	24	4				A V 84.4318 A \$108.		08.06	.0611 ⁽¹⁾ 14,197.922				D					
		Т	able	II - Deriva (e.g., ړ							sposed of s, convert					wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Ex (Month/Day/Year) if	Exec if an	Execution Date, if any		4. Fransaction Code (Instr. 3)		vative vrities vired r osed) r. 3, 4	Expiration (Month/Day			7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)		Security	De Se (In	s. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial 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)	(D)	Date Exer	rcisable	Expiration Date	Title		Amoun or Numbe of Shares	r							
Stock Option	\$77.2445	02/09/2024			M			998		(2)	09/09/2024	Commo		998		\$0.00	0.00		D			
Stock	\$76.7546	02/09/2024			M			140		(3)	02/19/2024	Comm		140	Γ	\$0.00	0.00		D			

Explanation of Responses:

- 1. Shares acquired pursuant to the T. Rowe Price Group, Inc. Employee Stock Purchase Plan at the noted weighted-average price.
- $2.\ 02/19/2014\ Grant\ -\ The\ option\ vests\ 20\%\ annually\ over\ a\ 5\ year\ period\ beginning\ on\ 12/10/2015.$
- 3.9/9/2014 Grant The option vest 20% annually over a 5 year period beginning on 12/10/2015.

Remarks:

Cheryl L. Emory, Assistant Corporate Secretary, POA for Hiebler, Jessica M

02/12/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).