FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL 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*							2. Issuer Name and Ticker or Trading Symbol PRICE T ROWE GROUP INC [TROW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Hiebles	-	TRICE I ROWE GROOT INC										D	irecto	r		10% Ov	vner					
	-	2. Date of Farlingt Transaction (Marth/Day/Mart)												(give title		Other (s	specify					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/27/2024										_ D	pelow) below Principal Accounting Off			below)	-	
T. ROWE PRICE GROUP, INC.																	Timelput Accounting Officer					
100 E. P.	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)										
,	-											Form filed by One Reporting Person										
(Street)																Form filed by More than One Reporting						
BALTIMORE MD 2120				2		Person																
(City)		R	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.															d to	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of	Security (Ins	tr. 3)		2A. Deemed						4. Securities Acquired (A) or Dis							6. Ownership		7. Nature			
				Date (Month/Day/Year				,	Transaction Code (Instr.		Of (D) (Instr. 3, 4 and 5)		nd 5)			Securities Beneficially		(D) o	r Indirect	of Indirect Beneficial		
					- [(Month/Day/Year)		rear)	8)							Owned Reporte		Following d	(I) (Ir	l) (Instr. 4)	Ownership (Instr. 4)	
									Code	Code V		mount	(A) or Price		e		Transaction(s) (Instr. 3 and 4)				,,	
Common	Ctools		06/27/2024		 		_	M		H	1,401		e	60 9275	÷	15,598,9223			D			
Common Stock				06/27/2024					IVI	+		1,401	A \$		\$69.8375		 '			Б		
Common Stock				06/27/2024								1,401	D \$115.		115.847	8 14,197.9223			D			
Common Stock				06/27/2024					A	A		21.1215	A \$117.563		17.5635	14,319.0438			D			
		Т	able	ll - Deriva	ative	Secu	ritie	s Ac	quir	ed, D	Disp	posed of	, or B	ene	ficially	Owr	ned					
				(e.g.,	puts,	calls	, wa	ırran	ts, o	ption	ıs,	converti	ble se	ecu	rities)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exec if an	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		14)		ivative urity tr. 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 Exe	e ercisab	le	Expiration Date	Title		Amount or Number of Shares							
Stock Option	\$69.8375	06/27/2024			M			1,401		(2)		09/10/2025	Common 1,40		1,401	\$0.0	\$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.
- $2.\ 09/10/2015\ Grant\ -\ The\ option\ vests\ 20\%\ annually\ over\ a\ 5\ year\ period\ beginning\ on\ 12/10/2015.$

Remarks:

<u>Cheryl L. Emory, Assistant</u> <u>Corporate Secretary, POA for Miebler, Jessica M</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.