## Edgar Filing: Alderson Christopher D - Form 4

	hristopher D											
Form 4 February 1:	5 2019											
FOR	ЛЛ	) STATES	SECU	RITI	ES .	AND EX(	CHA	NGE CO	MMISSION	OMB API		
Charle			Wa	ashing	gtor	n, D.C. 20	549			Number:	3235-0287	
Check t if no lo subject Section Form 4 Form 5	F CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Section 16(a) of the Securities Exchange Act of 1							Expires: January 2( Estimated average burden hours per response				
1(b).	ntinue. Section 17 truction	(a) of the l	Public I	Utility	Ho		ipany	Act of 1	935 or Section			
(Print or Type	e Responses)											
1. Name and Alderson (							5. Relationship of Reporting Person(s) to Issuer					
		PRICE T ROWE GROUP INC [TROW]						(Check all applicable)				
(Last) 100 E. PR.	(First) ATT STREET	(Middle)	3. Date (Month/ 02/13/	/Day/Ye		Fransaction		b	Director Officer (give ti elow) Vic		Owner (specify	
BALTIMO	(Street) DRE, MD 21202		4. If An Filed(M			Date Original ar)		A 	. Individual or Joi pplicable Line) X_ Form filed by Or Form filed by Mo erson	ne Reporting Pers	son	
(City)	(State)	(Zip)	Tal	ble I - N	Non-	Derivative S	Securi		red, Disposed of,	or Beneficially	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	d Date, if	3.	actio		s Acqı f (D)	uired (A) or	<ul> <li>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</li> </ul>	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/10/2019			Code G		Amount 262,000	(D) D	Price \$ 0	0	I	Spouse	
Common Stock	01/10/2019			G	V	262,000	А	\$ 0	380,821.714	D		
Common Stock	02/13/2019			А		19,649 (1)	А	\$ 0	400,470.714	D		
Common Stock	02/13/2019			А	V	4.444	А	\$ 91.1295	400,475.158	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	0ľ Number		
						Exercisable	Date	Title	Number		
				Cada V	$(\Lambda)$ (D)				of Sharaa		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Alderson Christopher D 100 E. PRATT STREET BALTIMORE, MD 21202			Vice President					
Signatures								
Kathryn L. Reilly, as attorney i	02/15/2019							

Christopher D

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- 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).
- On February 13, 2019, the Executive Compensation and Management Development Committee certified that the performance threshold (1) on certain performance-based restricted stock awards were met. The awards are settled in shares of common stock upon vesting. The
- awards vest in five equal annual installments beginning on February 28, 2019. (2) Shares acquired pursuant to the T. Rowe Price Group, Inc. Employee Stock Purchase Plan at the noted weighted-average price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.