

Uhde Philip  
Form 3  
April 25, 2019

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

|   |         |                                      |  |  |
|---|---------|--------------------------------------|--|--|
| 1. Name and Address of Reporting Person * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol |  |
| Â Echinus Advisors, LLC                   |         | (Month/Day/Year)                     | Interactive Brokers Group, Inc. [IBKR]             |  |
| (Last)                                    | (First) | (Middle)                             | 04/18/2019   |  |
| 63 CROSBY STREET,Â 4TH FLOOR              |         |                                      | 4. Relationship of Reporting Person(s) to Issuer   | 5. If Amendment, Date Original Filed(Month/Day/Year)                             |
| (Street)                                  |         |                                      |  |  |
| NEW YORK,Â NYÂ 10012                      |         |                                      | (Check all applicable)                             |  |
| (City)                                    | (State) | (Zip)                                | <input checked="" type="checkbox"/> Director       | <input type="checkbox"/> 10% Owner   |
|   |         |                                      | <input type="checkbox"/> Officer                   | <input checked="" type="checkbox"/> Other  |
|   |         |                                      | (give title below)                                 | (specify below)  |
|   |         |                                      | See Remarks  |  |
|   |         |                                      |  | 6. Individual or Joint/Group Filing(Check Applicable Line)                       |
|   |         |                                      |  | <input type="checkbox"/> Form filed by One Reporting Person                      |
|   |         |                                      |  | <input checked="" type="checkbox"/> Form filed by More than One Reporting Person |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security<br>(Instr. 4)               | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|--|--|---|--|
| Class A Common Stock, par value \$0.01 per share | 2,411,525  | I   | See footnote <sup>(1)</sup>                              |

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

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|---|---|--|---|---|--|
|---|---|--|---|---|--|

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| Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Security | Direct (D) or Indirect (I) (Instr. 5) |
|------------------|-----------------|-------|----------------------------|----------|---------------------------------------|
|------------------|-----------------|-------|----------------------------|----------|---------------------------------------|

## Reporting Owners

| Reporting Owner Name / Address   | Relationships |           |         |       |             |
|--|---------------|-----------|---------|-------|-------------|
|  | Director      | 10% Owner | Officer | Other |             |
| Echinus Advisors, LLC<br>63 CROSBY STREET<br>4TH FLOOR<br>NEW YORK, NY 10012 | X             |           |         |       | See Remarks |
| Uhde Philip<br>63 CROSBY STREET, 4TH FLOOR<br>NEW YORK, NY 10012             | X             |           |         |       | See Remarks |

## Signatures

|   |  |            |
|---|--|------------|
| /s/ Philip Uhde   |  | 04/25/2019 |
| <b>**Signature of Reporting Person</b>  |  | Date       |
| Echinus Advisors, LLC: by /s/ Philip Yang, its Chief Financial Officer & Chief Compliance Officer |  | 04/25/2019 |
| <b>**Signature of Reporting Person</b>  |  | Date       |

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) These securities are held for the account of Echinus Partners, LP, a Delaware limited partnership (the "Echinus Fund"). Echinus Advisors, LLC, a Delaware limited liability Company ("Echinus"), serves as the investment manager to the Echinus Fund. Mr. Philip Uhde ("Mr. Uhde") is the manager and majority controlling person of Echinus. In such capacities, each of Echinus and Mr. Uhde may be deemed to beneficially own the securities herein. Each Reporting Person disclaims beneficial ownership of the securities reported herein except to the extent of his or its pecuniary interest therein, if any.

**Remarks:**  
Echinus may be deemed a director by deputization of the Issuer by virtue of the fact that Mr. U

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.