#### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |
|--------------------------|-----------|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |
| Estimated average burden |           |  |  |  |  |
| nours 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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type   | pe Responses  | (3)             |                         |  |      |         |                          |  |          |                                  |  |   |            |  |   |                         |  |
|--|---|-----------------|-------------------------|--|------|---------|--------------------------|--|----------|----------------------------------|--|---|------------|--|---|-------------------------|--|
| 1. Name and Address of Reporting Person* Pfinsgraff Martin       |   |                 |                         | 2. Issuer Name and Ticker or Trading Symbol PNC FINANCIAL SERVICES GROUP, INC. [PNC] |      |         |                          |  |          |                                  |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director   |            |  |   |                         |  |
| (Last) (First) (Middle) THE TOWER AT PNC PLAZA, 300 FIFTH AVENUE |   |                 |                         | 3. Date of Earliest Transaction (Month/Day/Year) 04/27/2021                          |      |         |                          |  |          |                                  |  |   |            |  |   |                         |  |
| (Street) PITTSBURGH, PA 15222                                    |   |                 |                         | 4. If Amendment, Date Original Filed(Month/Day/Year)                                 |      |         |                          |  |          |                                  |  | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person |            |  |   |                         |  |
| (City  | )   | (State)         | (Zip)                   |  |      | Tab     | ole I -                  | Non-Deri   | ivative  | Securit                          | ties Acquir  | uired, Disposed of, or Beneficially Owned   |            |  |   |                         |  |
| 1.Title of So (Instr. 3)   | ecurity   | I               | Date<br>Month/Day/Year) | 2A. Deemo<br>Execution<br>any<br>(Month/Da   | Date | e, if C | . Trar<br>Code<br>Instr. | 8)   | (A) or ! | Dispose<br>3, 4 and<br>(A) o     | or   Ed of (D)   E | 5. Amount o<br>Beneficially<br>Reported Tra<br>Instr. 3 and   | Owned Foll | I<br>I<br>C  | Ownership<br>form:                                  | Beneficial<br>Ownership |  |
|  |   |                 | Table II - I            | Derivative   |      |         |                          | form o   | display  | ys a cu<br>of, or B              | irrently va  | alid OMB o  |            | ond unless th<br>mber.   |   |                         |  |
| Derivative<br>Security   | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | (Month/Day/Year | ransaction 3A. Deemed   | 4.<br>Transaction<br>Code  |      | 5.      |                          | 6. Date Exercisable and Expiration Date (Month/Day/Year) |          | able 7. Title and Title of Under |  |   |            | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Form of Derivative Security: Direct (D) or Indirect | (Instr. 4)              |  |
|  |   |                 |                         | Code   | V    | (A)     | (D)                      | Date<br>Exercisal  |          | piration<br>te                   | Title  | Amount<br>or<br>Number<br>of<br>Shares  |            |  |   |                         |  |
| Deferred<br>Stock<br>Unit  | <u>(1)</u>  | 04/27/2021      |                         | A  |      | 817     |                          | (1)  |          | <u>(1)</u>                       | \$5 Par<br>Commo<br>Stock  | n 817   | \$ 0       | 4,457 <sup>(2)</sup>   | D   |                         |  |

## **Reporting Owners**

|   | Relationships |              |         |       |  |  |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address  | Director      | 10%<br>Owner | Officer | Other |  |  |
| Pfinsgraff Martin<br>THE TOWER AT PNC PLAZA<br>300 FIFTH AVENUE<br>PITTSBURGH, PA 15222 | X             |              |         |       |  |  |

### **Signatures**

| Alicia G. Powell, Attorney-in-Fact for Martin Pfinsgraff | 04/29/2021 |
|--|------------|
| **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).
- Deferred stock unit ("DSU") granted pursuant to the PNC Directors Deferred Stock Unit Program (the "Program") under PNC's 2016 Incentive Award Plan. Each DSU represents (1) the right to receive at retirement one share of The PNC Financial Services Group, Inc. ("PNC") common stock, or in limited circumstances cash equal to the fair market value of one share of PNC common stock on the payment determination date, pursuant to the terms of the Program.
- (2) Includes an aggregate of 120 DSUs acquired by the reporting person as dividend equivalents under the Program subsequent to the date of the reporting person's most recent filing on Form 4.

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.