FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
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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

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1. Name and Address of Reporting Person* FOWLER JOHN MOORE					2. Issuer Name and Ticker or Trading Symbol INTL FCSTONE INC. [INTL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
										-				X	irector			10% C	wner	
(Last) (First) (Middle) 329 PARK AVENUE NORTH					3. Date of Earliest Transaction (Month/Day/Year) 03/05/2012													Other (spelow)		
SUITE 350					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) WINTER PARK FL 32789					,,									X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
()	State)	(Zip)																		
	Tak	le I - No	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, oı	Ben	efici	ally Ov	vned					
Date				ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)						nd Se Be Ov	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	Tr	Transaction(s) (Instr. 3 and 4)				(11341.4)	
Common Stock															36,52	4	D			
Common Stock 03/05/2					2012			A	A			A	\$21.95		5,200		I		By Spouse ⁽¹⁾	
	Т													y Own	ed					
		Execution if any	n Date,			of Deriv Secu Acqu (A) o Disp of (D (Inst	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		on Dat Day/Ye	e ar)	Amo Sec Und Deri Sec	ount of urities erlying vative urity (In 4)	ount	Derivati Securit	ve deriv / Secu Bene Own Follo Repo	derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	(FR JOH (FR AVENUE) (FR AVENU	(First) K AVENUE NORTH 50 R PARK FL (State) Tab Security (Instr. 3) Stock T Conversion or Exercise Price of Derivative Conversion (Month/Day/Year)	(First) (Middle) K AVENUE NORTH 50 R PARK FL 32789 (State) (Zip) Table I - North Security (Instr. 3) Stock Table II - I 2. Conversion or Exercise Price of Derivative (Month/Day/Year) (Month/Day/Year)	(First) (Middle) K AVENUE NORTH 50 R PARK FL 32789 (State) (Zip) Table I - Non-Derive Date (Month/D) Stock Table II - Derivati (e.g., pu 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date if any (Month/Day/Year)	(First) (Middle) (K AVENUE NORTH 50 Table I - Non-Derivative Security (Instr. 3) Table II - Derivative Security (Month/Day/Year) Table II - Derivative Security (Month/Day/Year) 2. Conversion or Exercise Price of Date (Month/Day/Year) (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transa Code (Month/Day/Year)	(First) (Middle) (K AVENUE NORTH 50 Table I - Non-Derivative Security (Instr. 3) Stock Stock Table II - Derivative Security (e.g., puts, calls (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Date of 03/05/2012 Table II - Derivative Security (if if any (Month/Day/Year)) (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Conversion of Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 4. Transaction Code (Instr. 8)	(First) (Middle) K AVENUE NORTH So R PARK FL 32789 (State) (Zip) Table I - Non-Derivative Securities (Month/Day/Year) Stock Stock Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) 2. Transaction Date (e.g., puts, calls, warr (Month/Day/Year) Stock Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) A. Transaction Date (Month/Day/Year) Stock Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) A. 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[INTL] Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) X Director Officer (give title below) Check all applicable) Check a	ER JOHN MOORE (First) (Middle) (K AVENUE NORTH 50 4. If Amendment, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Roger of Person Filed by More than One Reporting Person Filed Filed (Month/Day/Year) 2. Transaction Filed Person Filed Filed (Month/Day/Year) 2. Transaction Filed Person Filed Pe	

Explanation of Responses:

1. Transaction made within Spouse's IRA account in which the Reporting Person disclaims any beneficial interest and over which the Reporting Person exercises no investment or voting control.

03/06/2012 John M. Fowler

** 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.