FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Machinatan	$ \sim  $	20540	
Washington,	D.C.	20049	

STATEMENT	OF	<b>CHANGES</b>	IN B	ENEFICIA	L OWI	NERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
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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*     Perkins Abigail H					2. Issuer Name and Ticker or Trading Symbol StoneX Group Inc. [ SNEX ]						(Che	elationship of ck all applica Director Officer (	able)	g Perso	on(s) to Issu 10% Ow Other (s	ner	
(Last) 230 PAR	(F K AVENU	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/05/2023							X below) Officer (specify below)  Chief Information Officer					
10TH FL	OOR				4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(Street) NEW YO	ORK N	Υ	10169													One Report	ing
(City)	(8	State)	(Zip)				` ,	Transa				to a contrac	instruction o	r written nla	an that i	is intended to	satisfy
	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.																
		Та	ble I - Non	-Deriva	tive S	ecuritie	s Ac	quired,	Disp	osed o	f, or Ber	neficially	Owned				
Date		2. Transac Date (Month/Da	Day/Year) Exe		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amount Securities Beneficial Owned For Reported	s   F lly ( ollowing (	Form: (D) or	orm: Direct 0) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				,		
Common	Stock												13,	516		D	
Common Stock						375				By Children							
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
1. Title of Derivative Security  2. Conversion Date (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)		Code	nsaction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and of Securities Underlying Derivative S (Instr. 3 and			es Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	v	(A)		Date Exercisable		xpiration ate	Title	Amount or Number of Shares	ount (Instr. 4)	(Instr. 4)	(-/		
Stock Options <sup>(1)</sup>	\$64.25 <sup>(2)</sup>	12/05/2023		A		150,000		12/05/0026	(3) 1	2/05/0031	Common Stock	150,000	\$64.25	195,0	00	D	

## Explanation of Responses:

- 1. The option grant was approved by the Company's Board of Directors on December 5, 2023.
- 2. The strike price of the grant was set by the Company's Board of Directors as the closing price on the day prior to the grant, December 4, 2023.
- 3. The options vest in equal tranches on each of the third, fourth, fifth, sixth and seventh anniversaries of the grant date.

## Remarks:

Abigail H. Perkins

12/07/2023

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.