FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT | OF CHA | ANGES IN | BENEFICIA | AL OWNER | SHIP |
|-----------|--------|----------|-----------|----------|------|

| OMB APPRO |)VAL |
|------------------------|-----------|
| 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

| BRANC (Last) | d Address of CH SCOT (Fi | rst) (| Middle) | | 3. Da | 2. Issuer Name and Ticker or Trading Symbol INTL FCSTONE INC. [INTL] 3. Date of Earliest Transaction (Month/Day/Year) 02/26/2020 | | | | | | | | | | all app | er (give title | g Pers | 10% C | wner (specify |
|---|--|--|---|-----------------------------------|---------------------------------|---|------|---|---|------------------|---------------------------------|---|--|---------------------|---|---|--|--|---|--|
| SUITE 33 (Street) WINTER (City) | PARK FL | | 32789 ———————————————————————————————————— | | 4. If <i>i</i> | | | | | | | | | | i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | 2. Transa | action 2A. Deemed Execution Date, | | 3. 4. Securi Transaction Disposed Code (Instr. 5) | | curities Acquired (A sed Of (D) (Instr. 3, | | | 3) or 5 4 and Se Be Ov | | Amount of ecurities eneficially wned Following | | nership : Direct · Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | Code | v | Amount | mount (A) or (D) | | Pric | rice Repo | | ea ction(s) 3 and 4) | | | (Instr. 4) | | |
| Restricted | Shares of | Common Stock ⁽¹ | 1) | 02/26 | 5/2020 | 2020 | | A | | 1,474 A | | A | \$ | SO | 22,009 | | | D | | |
| Common Stock | | | | | | | | | | | | | | | 473,587 | | | I | By Trust | |
| Common Stock | | | | | | | | | | | | | | | | 37 | 76,000 | | I | By Spouse |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transac Code (Ir 8) | saction of E | | | 5. Date Exercisable and Expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | Deriv Secu | rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | wnership orm: irect (D) r Indirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Nun of | ount nber res | | | | | | |

Explanation of Responses:

1. Acquired through the Company's Restricted Stock Plan as part of the annual compensation of non-executive directors and as disclosed in the Proxy Statement dated January 17, 2020. Shares vest equally on anniversary in years one, two and three.

Remarks:

Scott J. Branch

02/26/2020

** 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.