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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| C  | heck this box if no longer subject to |
|----|---------------------------------------|
|    |                                       |
| S  | ection 16. Form 4 or Form 5           |
| 0  | bligations may continue. See          |
| lr | struction 1(b).                       |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

# OMB APPROVAL OMB Number:

| I | OMB Number.             | 3235-0287 |
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|   | Estimated average burde | en        |
|   | hours per response:     | 0.5       |
|   |                         |           |

| 1. Name and Address of Reporting Person*<br><u>PARTHEMORE ERIC</u> | 2. Issuer Name and Ticker or Trading Symbol<br>INTL FCSTONE INC. [INTL] | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)              |  |  |  |  |  |
|--------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|--|--|--|--|
|                                                                    |                                                                         | X Director 10% Owner                                                                    |  |  |  |  |  |
| (Last) (First) (Middle)<br>329 PARK AVENUE N.                      | 3. Date of Earliest Transaction (Month/Day/Year)<br>07/29/2016          | Officer (give title Other (specify below) below)                                        |  |  |  |  |  |
| SUITE 350                                                          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                | 6. Individual or Joint/Group Filing (Check Applicable<br>Line)                          |  |  |  |  |  |
| (Street)<br>WINTER PARK FL 32789                                   |                                                                         | X Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |  |  |  |  |  |
| (City) (State) (Zip)                                               |                                                                         |                                                                                         |  |  |  |  |  |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                                            |                                                             |              |   |                                                                         |               |                   |                                                                           |                                                                   |                                                                   |
|----------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|--------------|---|-------------------------------------------------------------------------|---------------|-------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|
| 1. Title of Security (Instr. 3)                                                  | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code (Instr. |   | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 and<br>5) |               |                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|                                                                                  |                                            |                                                             | Code         | v | Amount                                                                  | (A) or<br>(D) | Price             | Transaction(s)<br>(Instr. 3 and 4)                                        |                                                                   | (1130.4)                                                          |
| Restricted Shares of Common Stock <sup>(1)</sup>                                 | 07/29/2016                                 |                                                             | A            |   | 259                                                                     | A             | \$ <mark>0</mark> | 17,852                                                                    | D                                                                 |                                                                   |

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | of  |     | Expiration Date<br>(Month/Day/Year)<br>S |                    |       | and<br>nt of<br>ties<br>lying<br>tive<br>ty (Instr. 3 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|-----------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|---|-----|-----|------------------------------------------|--------------------|-------|-------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
|                                                     |                                                                       |                                            |                                                             | Code                         | v | (A) | (D) | Date<br>Exercisable                      | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares                |                                                     |                                                                                                                            |                                                                          |                                                                    |

#### Explanation of Responses:

1. Acquired through the Company's Restricted Stock Program. Shares vest equally on anniversary in years one, two and three.

#### **Remarks:**

## Eric Parthemore

08/02/2016 Date

\*\* Signature of Reporting Person

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.