FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040	

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
netruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
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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*     Smith Philip Andrew						2. Issuer Name and Ticker or Trading Symbol StoneX Group Inc. [ SNEX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title V Other (specify				
(Last) (First) (Middle) 230 PARK AVENUE 10TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 12/09/2021								Officer (give title X Other (specify below)  CEO - subsidiary entity					
(Street) NEW YO	DRK N	Y	10169		4. If Amendment, Date				e of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(S	-	(Zip)															
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/			ion	2A. Deemed Execution Da		emed 3. Transaction Code (Instr		action	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Dwnership		
									Code	v	Amount	(A) or (D)	Price	Transa	action(s) 3 and 4)		(Instr. 4	
Common <sup>(1)</sup>			12/09/2	021	)21					7,500	A	<b>\$25.9</b> 1	1 10	50,972		D		
Common <sup>(1)</sup>			12/09/2	2021				S		7,500	D	\$61.639	8 <sup>(2)</sup>	53,472		D		
Common <sup>(1)</sup>			12/10/2	/2021				M		7,500	A	<b>\$25.9</b> 1	1 10	50,972		D		
Common <sup>(1)</sup> 12/1			12/10/2	021	21			S		7,500	D	\$59.912	1(2) 15	153,472		D		
		T	able I	II - Deriva (e.g., )	ative : puts,	Secu calls	ritie , wa	s Acc rrant	quired s, opt	d, Dis	sposed of , converti	, or Be	neficially curities)	y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code ( 8)	action of Deriv Secu Acqu (A) o Disp of (D		osed 0) tr. 3, 4	Expiration (Month/lities red seed 3, 4			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares					
Stock Options <sup>(1)</sup>	\$25.91	12/09/2021			M			7,500	12/16	/2016	12/16/2021	Common	7,500	\$0	107,50	0	D	
Stock Options <sup>(1)</sup>	\$25.91	12/10/2021			M			7,500	12/16	/2016	12/16/2021	Common	7,500	\$0	100,00	0	D	

## Explanation of Responses:

- 1. All of the transactions reported on this form are program transactions pursuant to a Rule 10b5-1 plan.
- 2. The price reported represents an average price. The Reporting Person will provide to the Commission, the issuer and any stockholder, upon request, full information regarding the number of shares sold at each separate price.

## Remarks:

Philip Andrew Smith

12/13/2021

\*\* 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.