FORM 3

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

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

	OMB APPROVAL								
	OMB Number: 3235-0104 Estimated average burden								
	hours per response	e: 0.5							

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

1. Name and Address of Reporting Person*  AMERICAN FINANCIAL GROUP INC			2. Date of Event Requiring Staten Month/Day/Year L0/23/2015	nent	3. Issuer Name and Ticker or Trading Symbol STONEGATE MORTGAGE CORP [ SGM ]							
(Last) 301 E. FOUR	(First)	(Middle)				ationship of Reporting  ( all applicable)  Director  Officer (give title below)	y Perso	10% Owne Other (spe	er	(Mon	th/Day/Year)	ate of Original Filed  /Group Filing (Check
(Street) CINCINNATI (City)	OH (State)	45202 (Zip)				below)		below)		X	Form filed by	y One Reporting Person y More than One erson
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)		1)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					2,602,111 I			Owned through subsidiaries				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Expiration			Expiration D	ate Exercisable and iration Date nth/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi			4. Conversion or Exercise Price of		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiratio Date	n Title	e		Amount or Number of Shares	Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

Remarks:

Mark A. Weiss, Vice President 10/30/2015

\*\* Signature of Reporting Person Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.