STONERIDGE INC Form 3 March 30, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> DeGaynor Jonathan B			2. Date of Event Requi Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol STONERIDGE INC [SRI]				
(Last)	(First)	(Middle)	03/30/2015		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
6265 THUR	BER ROAI	D							
	(Street)			(Check	all applicable)	6. 1	6. Individual or Joint/Group		
BLOOMFIELD HILLS, MI 48301				<i>v</i>			Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table	I - Non-Derivat	ive Securitie	es Benefi	icially Owned		
1.Title of Secur (Instr. 4)	ity			unt of Securities ially Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature Ownershi (Instr. 5)	of Indirect Beneficial		
Reminder: Repo owned directly o		ate line for ea	ch class of securities be	neficially S	EC 1473 (7-02))			
Т	inform require curren	ation conta ed to respo tly valid OI	pond to the collectio ained in this form are nd unless the form c MB control number. rities Beneficially Own	e not displays a	warrants, opti	ions, conv	ertible securities)		
1. Title of Deriv (Instr. 4)	vative Securit	Expir	ration Date Se /Day/Year) De	Title and Amount of curities Underlying erivative Security	f 4. Conversio or Exercis Price of		of (Instr. 5)		

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Expires:

response ...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships								
r g ta ta ta ta ta ta	Director	10% Owner	Officer	Other					
DeGaynor Jonathan B 6265 THURBER ROAD BLOOMFIELD HILLS, MI 48301	Â	Â	President and CEO	Â					
Signatures									
/s/ Robert M. Loesch, by power of attorney		03/30/2015							
**Signature of Reporting Person		Date							
Explanation of Responses:									

No securities are beneficially owned

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.