FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

1. Name and Address of Reporting Person* HUNTER KIMBERLY A					2. Issuer Name and Ticker or Trading Symbol CORN PRODUCTS INTERNATIONAL INC [CPO]								5. Relationship of Reporting P (Check all applicable) Director X Officer (give title			10% Owner Other (specify		
(Last) (First) (Middle) 5 WESTBROOK CORPORATE CENTER					3. Date of Earliest Transaction (Month/Day/Year) 02/08/2011								below) below) Corporate Treasurer					
(Street) WESTCHESTER IL 60154 (City) (State) (Zip)					Amend	lment, Da	ate of	Original	Filed	(Month/Day	Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Deriver 1. Title of Security (Instr. 3) 2. Transa Date (Month/D					2A Exc r) if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securitie	s Acquired	(A) or	5. Amount of Securities Beneficially Owned Followir		6. Owner Form: Di (D) or Ind (I) (Instr.	rect I lirect I 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 02/08				08/2011	/2011			A		700(1)	A	\$0	17,	914	D			
Common Stock 02/08				08/2011	/2011			A		3,386(2)	A	\$0	\$0 21,3		D			
Common Stock 02/08				/08/2011	/2011			F		678(3)	D	\$47.95	20,622		D			
Common Stock												14.405(4)		I		By 401(k) Plan		
		Та	ble II - Deri (e.g.							osed of, convertib			Owned		,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yes	Date, Transact Code (In		tion of		6. Date Exercis Expiration Dat (Month/Day/Ye		ite	Amount o Securities Underlyin Derivative			9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Ov s Fo llly Dii or g (I)	vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Options(Right	\$47.95	02/08/2011		A		2,900		(5)		02/07/2021	Common Stock	2,900	\$0	2,900)	D		

Explanation of Responses:

- 1. These are restricted stock units ("RSUs") issued under the Corn Products International, Inc. Stock Incentive Plan. The RSUs may be settled only in shares of Common Stock (one share per RSU) and will vest on February 8, 2014. In the event of termination of employment due to death, disability or retirement (defined as age 55 and 10 years of service or age 62), the RSUs will vest on a pro-rata basis using the number of full months employed during the thirty-six month vesting period.
- 2. Shares acquired upon vesting of performance share award granted January 29, 2008. Vesting of the performance share award was based on criteria in addition to the increase in the market price of Corn Products International, Inc.'s common stock
- 3. Shares withheld to pay applicable taxes upon the vesting of performance share award granted January 29, 2008.
- 4. The information in this report is based on a plan statement dated as of January 31, 2011.
- 5. These options become exercisable in three equal annual installments on February 8, 2012, 2013 and 2014.

Mary Ann Hynes, Attorney in <u>Fact</u>

02/09/2011

** 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.