FORM 4

Check this box if no longer subject

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

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number: 3235-02										
Estimated average burden										
hours per respons	e: 0.5									

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

Name and Address of Reporting Person* <u>Jordan Rhonda L</u>					2. Issuer Name and Ticker or Trading Symbol Ingredion Inc [ INGR ]								k all app Direc	tor	ng Pers	on(s) to Is				
(Last)	(Fir	st) (M	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 12/11/2023								Office below	r (give title		Other (s	specify		
5 WESTBROOK CORPORATE CENTER				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X Form filed by One Reporting Person						
WESTC	HESTER II	·	50154	4		Form filed by More than One Rep Person									One Repo	orting				
(City)	(Sta	ate) (Ž	Zip)		Ru	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - N	lon-Deriva	tive	Secui	rities	Acc	quire	d, Di	sposed of	, or B	enefic	ially	/ Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear) Execution				3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		d (A) or r. 3, 4 and	5)	5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								(	Code	v	Amount	(A) or (D)	Price	Transa		saction(s) r. 3 and 4)			(111511.4)	
Common Stock 12/11/202				23	3 A					360.6116(1)	A	\$103	03.99 22,563.7058 <sup>(2)</sup> D							
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date, y hth/Day/Year)	4. Transa Code ( 8)					Expiration Date (Month/Day/Year) Sec Unc Der Sec 3 ar			e and nt of ities lying ative ity (Instr. 4)	De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Insi	wnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D)		(D)	Date Exer	) rcisable	Expiration Date	Title	Amount or Number of Shares							

## Explanation of Responses:

- 1. These are restricted stock units issued to the Company's outside directors as part of their annual retainer and are payable in stock no earlier than six months after resignation or retirement as a director and no later than ten years thereafter.
- 2. Includes restricted stock units ("RSUs") acquired through deemed dividend reinvestment. RSUs acquired through deemed dividend reinvestment vest on the dates when the RSUs with respect to which they are deemed dividends vest.

Michael N. Levy, attorney-in-12/12/2023 **fact** 

\*\* 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.