FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtori,	D.C.	20343

STATEMENT O	F CHANGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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

Name and Address of Reporting Person* Sonntag Martin						2. Issuer Name and Ticker or Trading Symbol Ingredion Inc [INGR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 5 WEST	•	rst) ORPORATE CE	(Middle) NTER			3. Date of Earliest Transaction (Month/Day/Year) 02/07/2017								X Officer (give title below) Other (specify below) SVP, Strategy and Glob Bus Dev				
(Street) WESTCHESTER IL 60154				- 4. li	4. If Amendment, Date 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)	n Doris	rotive		ouritio.	. ^ .	auiro	ı Di	anacad (of or Bo	noficia	Illy Owner	4			
Date			2. Trans	action 2A Ex Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. S Transaction Dis Code (Instr. 5)		4. Secur Dispose	urities Acquired (A) sed Of (D) (Instr. 3, 4		5. Amou Securitie Benefici Owned F	nt of es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Cod	e V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)
Common Stock 02/02				7/2017	/2017		A		820(820 ⁽¹⁾ A		3,203.5948(2)			D			
		7									osed of converti			y 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 D if any (Month/Day)	Date, Transac			of E		6. Date Exercisa Expiration Date (Month/Day/Year		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares					
Employee Stock Options (Right to	\$118.97	02/07/2017			A		6,736		(3)		02/06/2027	Common Stock	6,736	\$0	6,736	5	D	

Explanation of Responses:

- 1. These are restricted stock units ("RSUs") issued under the Ingredion Incorporated Stock Incentive Plan. The RSUs may be settled only in shares of common stock (one share per RSU) and will vest on February 7, 2020. In the event of termination of employment due to (a) death, (b) disability or (c) retirement on or after (i) age 65, (ii) age 62 with 5 years of service or (iii) age 55 with 10 years of service, the RSUs will vest on a pro-rata basis using the number of full months employed during the thirty-six month vesting period. Notwithstanding the foregoing, in the event of such retirement on or after February 7, 2018, the RSUs will vest on February 7, 2020.
- 2. Includes 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
- 3. These options become exercisable in three equal annual installments on February 7, 2018, 2019 and 2020.

Christine M. Castellano, 02/09/2017 Attorney-in-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.