FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB APF	OMB APPROVAL										
OMB Number:	3235-0287										
Estimated average burden											

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). S	ee Instruction 1	0.																		
Name and Address of Reporting Person* Fischer David B					2. Issuer Name and Ticker or Trading Symbol Ingredion Inc [INGR]							5 (0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
FISCHEL DAVIG D				`									Director				10% O\	wner		
(Last) (First) (Middle) 5 WESTBROOK CORPORATE CENTER				3. Date of Earliest Transaction (Month/Day/Year) 09/30/2024										Office below	er (give title /)		Other (s below)	specify		
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line)						
· /	HESTER II	ϵ	50154	1										Form filed by One Reporting Person						
WESTCHESTER IE 00131													Form filed by More than One Reporting Person							
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - N	on-Deriva	tive	Secu	rities	Ac	quire	d, Di	sposed of	, or B	enefic	ially	y Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			Execution Date,		,	3. Transa Code (8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Securi Benefi Owned		ies ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 as		ction(s)			(Instr. 4)			
Common Stock 09/30/202)24				A		295.399(1)	A	\$135	.41	16,961.9637(2)			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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership tt (Instr. 4)		
									Date)	Expiration		Amount or Number of							

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-

fact

** Signature of Reporting Person Date

10/01/2024

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.