FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

Estimated average burden 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).

| Fi | led pursuant to Section 16(a) of the Securities Exchange Act of 19 or Section 30(h) of the Investment Company Act of 1940 | 934 |
|-------------------------|--|-----|
| ss of Reporting Person* | 2. Issuer Name and Ticker or Trading Symbol | 5. |

| 1. Name and Address of Reporting Person* ARANGUREN LUIS | | | | | <u>CC</u> | 2. Issuer Name and Ticker or Trading Symbol CORN PRODUCTS INTERNATIONAL INC [CPO] | | | | | | | | | Check all a | | | g Person(s) to Issuer 10% Owner Other (specify below) | |
|--|-------|--|-------------------------------|---------|--|---|---------|--|------------------|--|----------------------|-------|---|--|--|---|---|--|--------|
| (Last) 5 WEST | ` | rst) (| Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2008 Officer (give title below) | | | | | | | | | | | | | | |
| (Street) WESTCHESTER IL 60154 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | rm filed by Mo rson | re than Or | іе Кер | orting |
| | | Tabl | e I - No | n-Deriv | ative/ | Sec | curitie | s Acc | quired | , Dis | posed o | f, or | Bene | ficia | ally Ow | ned | | | |
| Date | | | 2. Transa Date (Month/D | | Execution Da | | Date, | Transaction Disposed Code (Instr. | | ties Acquired (A) o I Of (D) (Instr. 3, 4 a | | | d 5) Seci Ben Owr | mount of urities eficially led Following orted | Form: Di (D) or Inc | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount (A) or (D) | | Price | Tran | saction(s) r. 3 and 4) | | | (Instr. 4) | | |
| Common | Stock | | | 01/01 | /2008 | | | | A | | 469.613 | 9(1) | A | \$ | 0 5,7 | 722.1592 ⁽²⁾ | 2.1592 ⁽²⁾ D | | |
| | | Та | | | | | | | | | osed of, onvertib | | | | y Owne | d | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) | Execution Date, If any | | | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price o Derivative Security (Instr. 5) | e derivative | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | of Sha | res | | | | | |

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 therafter.
- 2. Includes 10.4302 restricted stock units acquired through deemed dividend reinvestment.

Mary Ann Hynes, Attorney in **Fact**

01/03/2008

OMB APPROVAL

0.5

OMB Number:

** Signature of Reporting Person

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.