FORM 4

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

Washington	, D.C. 20549	

iton, D.C. 20549	OMB APPROVAL

- 1							
	OMB Number:	3235-0287					
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	hours per response	: 0.5					

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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	ee Instruction 1																		
Name and Address of Reporting Person*     Wilson Dwayne Andree				2. Issuer Name <b>and</b> Ticker or Trading Symbol Ingredion Inc [ INGR ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
			_°								1	Direc	tor		10% O	wner			
(Last)	(Fir	st) (N	Middle)	)		3. Date of Earliest Transaction (Month/Day/Year) 12/12/2024							Officer (give title below)				Other (: below)	specify	
5 WESTBROOK CORPORATE CENTER																			
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line)	Form	filed by On	o Don	ortina Doro	on
WESTC	HESTER II	i. (	50154											V		filed by On		•	
-														Form filed by More than One Reporting Person					
(City)	(Sta	ate) (2	Zip)																
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	auire	d. Dis	sposed of	or F	Senefi	cially	v Own	ed			
4 Title of (	Passenites (Imag			1						u, 2.0	•	-					6.00	anabin	7. Nature
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/			Year)	Execution Date,			3. 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 Disposed Of (D) (Instr. 3)			ed (A) oi str. 3, 4 a	and 5) Securit		ies	Form (D) o	n: Direct or Indirect	of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	1	Reporte Transa (Instr. 3	ported ansaction(s) str. 3 and 4)			(Instr. 4)
Common Stock 12/12/20				)24				A		274.82(1)	A	\$14	5.55	5.55 26,005.4517(2			D		
		Tal	ble II								osed of,				Owne	d			
				(e.g., pu	its, ca	aiis, v	varra	ants	, opti	ons,	convertib	ie se	curitie	<del>!</del> S)					1
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			Amount of Securities		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: y Direct (D) or Indirec (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amoun or Numbe of Shares	r					

## **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-12/13/2024 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.