## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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. Name and Address of Reporting Person*  DELIO ANTHONY P						2. Issuer Name <b>and</b> Ticker or Trading Symbol Ingredion Inc [ INGR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify					
(Last) (First) (Middle) 5 WESTBROOK CORPORATE CENTER							3. Date of Earliest Transaction (Month/Day/Year) 02/04/2014								below)			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  Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)												1 01301	'			
		Tab	le I - No	n-Deriv	ative	e Se	curitie	s Ac	quired	, Dis	sposed o	of, or Be	enefic	ially	Owned	l			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Date,				3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instr. 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) o (D)	r Pric	rice Reported Transact (Instr. 3 a		tion(s)			(Instr. 4)
Common Stock 02/0				02/04	/2014	2014			A		1,000	) <sup>(1)</sup> A		6 <mark>0</mark>	9,217.6991(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)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date, T	1. Transactior Code (Instr. 3)		n of		6. Date Exercisa Expiration Date (Month/Day/Year		е	Amount of		S (I	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					
Employee Stock Options (Right to Buy)	\$59.58	02/04/2014			A		7,700		(3)		02/03/2024	Common Stock	7,70	0	\$0	7,700		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 4, 2017. 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.
- 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 4, 2015, 2016 and 2017.

Christine M. Castellano, 02/06/2014 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.