Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

| STATEMENT OF C | HANGES IN | BENEFICIAL | OWNERSHIP |
|----------------|-----------|------------|-----------|
|                |           |            |           |

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |
| 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*     Xu Jinghuai |  |  | 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)  | (Fi  | rst) (                                     | (Middle) NTER   |               | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2023   |                     |  |      |  |  |                      | X Officer below)  | (give title<br>Chief Inn  | Other (sp<br>below)                                 | pecify   |  |                             |                                    |
| (Street) WESTCHESTER IL 60154                         |  |  |   |               | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |                     |  |      |  |  |                      | Lin   | Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |  |  |                             |                                    |
| (City)  | (St  | ate)                                       | (Zip)   |               | Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |                     |  |      |  |  |                      |   | to  |   |  |  |                             |                                    |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |   |               |   |                     |  |      |  |  |                      |   |   |   |  |  |                             |                                    |
| Date  |  |  | 2. Transa<br>Date<br>(Month/D                                       | Execution Dat |   | Date,               | , Transaction Disposed Code (Instr. 5)   |      | ities Acquired (A) or<br>d Of (D) (Instr. 3, 4 ar          |  | Beneficia<br>Owned F | s<br>ally<br>following  | 6. Owner<br>Form: Di<br>(D) or Inc<br>(I) (Instr.   | m: Direct<br>or Indirect<br>nstr. 4)                | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership  |  |                             |                                    |
|   |  |  |   |               |   |                     |  | Code | /  | Amount                                 | (A) or<br>(D)        | Price   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)  |   |  |  | nstr. 4)                    |                                    |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |               |   |                     |  |      |  |  |                      |   |   |   |  |  |                             |                                    |
| Derivative Conversion Date                            |  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Day<br>if any<br>(Month/Day/                | ate, Tr       | 4.<br>Transaction<br>Code (Instr.<br>8)   |                     | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |      | 6. Date Exercisable<br>Expiration Date<br>(Month/Day/Year) |  |                      | 7. Title and Am<br>of Securities<br>Underlying<br>Derivative Secu<br>(Instr. 3 and 4)       |   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Owners Form: Direct (I) Or Indirect (I) (Instr | vnership<br>rm:<br>rect (D) | Beneficial Ownership ct (Instr. 4) |
|   |  | C  | ode   |               |   | Date<br>Exercisable | Expiration<br>ble Date   |      | Title  | Amount<br>or<br>Number<br>of<br>Shares |                      |   |   |   |  |  |                             |                                    |
| Phantom<br>Stock                                      | (1)  | 03/31/2023                                 |   |               | Α   |                     | 37.446   |      | (1)  |  | (1)                  | Common<br>Stock   | 37.446  | \$101.74  | 8,934.48   | 49   | D                           |                                    |

## **Explanation of Responses:**

1. Represents the aggregate number of shares of phantom stock allocated to the reporting person under the SERP as of the date hereof based on the closing price of a share of the issuer's Common Stock on March 31, 2023. Each phantom stock unit represents the right to receive one share of common stock.

Michael N. Levy, attorney-in-

**fact** 

\*\* Signature of Reporting Person

Date

04/03/2023

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).