FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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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. Name and Address of Reporting Person* Fernandes Larry						2. Issuer Name and Ticker or Trading Symbol Ingredion Inc [INGR]										eck all appli Direct	cable) or	g Per	son(s) to Iss	/ner		
(Last) 5 WEST	,	rst) ORPORATE CE	(Middle) NTER			3. Date of Earliest Transaction (Month/Day/Year) 02/08/2019										X Officer (give title below) Other (specification) SVP, Sust & Chief Comm Officer						
(Street) WESTCHESTER IL 60154							4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si		(Zip)					- 4								0						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4 Transaction D Code (Instr. 5		4. Securi	Securities Acquired (A) posed Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								ode '	v	Amount	(A) or Pi		Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)				
Common Stock 02/						2019				A		1,089	(1)	A	\$0	12,940.2431(2)			D			
Common Stock																4,	4,766		I	By 401(k) Plan		
		Т	able II -									osed of onverti				Owned			,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. B)				6. Date Exercisa Expiration Date (Month/Day/Yea			Amount of			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exer	cisable		xpiration ate	Title	O N O	lumber							
Employee Stock Options (Right to Buy)	\$91.85	02/08/2019			A		7,135			(3)	0	2/07/2029	Comm Stock		7,135	\$91.85	7,135		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 8, 2022. 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. Nothwithstanding the foregoing, in the event of such retirement on or after February 8, 2020, the RSUs will vest on February 8, 2022.
- 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.
- 3. These options will vest in three equal annual installments on February 8, 2020, 2021 and 2022.

John E. Lowe, attorney-in-fact 02/12/2019

** 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.