

**SUMMARY ANNUAL REPORT FOR
INGREDION INCORPORATED MASTER WELFARE AND CAFETERIA PLAN**

This is a summary of the annual report of the Ingedion Incorporated Master Welfare And Cafeteria Plan, a health, life insurance, dental, vision, temporary disability, long-term disability and death benefits plan (Employer Identification Number 22-3514823, Plan Number 525), for the plan year 01/01/2017 through 12/31/2017. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has insurance contracts with BLUECROSS BLUESHIELD OF ILLINOIS, LIFE INSURANCE COMPANY OF NORTH AMERICA and METROPOLITAN LIFE INSURANCE COMPANY to pay certain Health, Life insurance, Long-term disability, AD&D, CRITICAL ILLNESS, and Vision claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2017 were \$18,870,392.

Because they are so called "experience-rated" contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending 12/31/2017, the premiums paid under such "experience-rated" contracts were \$16,656,526 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$15,450,333.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 5 Westbrook Corporate Center, Westchester, IL 60154 and phone number, 708-551-2600.

You also have the legally protected right to examine the annual report at the main office of the plan: 5 Westbrook Corporate Center, Westchester, IL 60154, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.