FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	
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OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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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* TITUS BRIAN					2. Issuer Name and Ticker or Trading Symbol Corteva, Inc. [CTVA]										k all app Direc	tor		10% O	wner	
(Last)	(Fir RTEVA, IN	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/25/2024									X	X Officer (give title Other (special below) See Remarks					
9330 ZIONSVILLE ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) INDIAN	APOLIS IN	N 4	6268			X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication															
Check this box to indicate that a transaction was made pursuan satisfy the affirmative defense conditions of Rule 10b5-1(c). See																				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Execu y/Year) if any		eemed ution Date, th/Day/Year)				s Acquired (A) f (D) (Instr. 3, 4		and Secur Benef		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	r Price		Transac	action(s) 3 and 4)			(111511.4)		
Common Stock 01/25/20					:024				Α		5,137(1)	A	\$	0	25,948.8149		D			
Common Stock 01/25/20				2024				F		1,747(2)	D	\$45	.24	4 24,286.5793 ⁽³⁾		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	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)		sansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable at Expiration Date (Month/Day/Year) Date Expirat Exercisable Date		ate (ear)	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Represents the number of shares received upon the settlement of previously awarded performance-based share units (PSUs) following the certification of achievement of specified performance metrics during the three-year performance period and approval of the settlement of the PSU grant by the People and Compensation Committee of the Board of Directors on January 25, 2024. The shares underlying the PSU grant vested at the conclusion of the performance period on December 31, 2023.
- 2. Represents shares withheld by the Issuer to pay taxes due upon the settlement of the Reporting Person's PSU award.
- 3. Includes acquisition of 84.7644 shares pursuant to dividend reinvestment.

Remarks:

Vice President, Controller and Principal Accounting Officer

/s/Abigail Jarrell, by powerof-attorney

01/29/2024

** 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.