FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

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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* Chwat Anne (Last) (First) (Middle) 521 WEST 57TH STREET					- <u>II</u> <u>F</u> 3.	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] 3. Date of Earliest Transaction (Month/Day/Year) 07/15/2019								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) EVP, GC, & Corp. Sec'y					
(Street) NEW Y(Y tate)	10019 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
1 Title of	Socurity (In a		ble I - Nor			_	curities		quired,	Dis		-		y Owned	at of	6.0	mershin	7. Nature of	
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Year)	Execution Date,		Transaction Disposed Of (D) (Instr. 3, 4 a				Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership			
								Code	v	Amount	unt (A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock													38,87	38,873.034		D			
Common Stock													4,484.078(1)			I	By 401k		
1. Title of Derivative Conversion Date Exercise (Month/Day/Year) if a			(e.g., put			5. Number of Derivative		ired, Disposed o options, conver 6. Date Exercisable and Expiration Date (Month/Day/Year)		onvertib	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Stock Equivalent Unit	(2)	07/15/2019			A		21.815 ⁽³⁾		(4)		(4)	Common Stock	21.815	\$144.74	6,691.266 ⁽⁵⁾		D		
Purchased Restricted Stock Units	(6)								04/01/20)22	04/01/2022	Common Stock	4,135		4,135	5	D		
Purchased Restricted Stock Units	(6)								04/02/20)21	04/02/2021	Common Stock	3,854		3,854	4	D		
Purchased Restricted Stock	(6)								04/03/20)20	04/03/2020	Common Stock	4,105		4,105	5	D		

Explanation of Responses:

- 1. Units acquired upon reinvestment of dividends accrued on units under IFF's 401(k) Plan during 2019.
- 2. The Stock Units ("Units") convert to Common Stock on a one-for-one basis.
- 3. Reflects Units under the Company's deferred compensation plan resulting from deferral of compensation and the 25% premium contributed by the Company on such Units. Units contributed by the Company are subject to vesting based on continued employment through December 31, 2020.
- 4. The Units are payable in Common Stock upon earlier of termination of employment or January 1 following retirement.
- 5. Includes Units acquired during the period upon reinvestment of dividends under the Company's deferred compensation plan during 2019. The transactions were exempt pursuant to Rule 16a-11.
- 6. The Purchased Restricted Stock Units ("PRSUs") convert to Common Stock on a one-for-one basis.

/s/ Nanci Prado, attorney in fact 07/17/2019

** 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.