Instruction 1(b).

FORM 5

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

| Machinatan | D | 20E 40 |
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| Washington, | D.C. | 20549 |

| ANNUAL STATEMENT | F CHANGES IN BENEFICIAL | | | | | | |
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| OMB APPROVAL | | | | | | | |
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| OMB Number: | 3235-0362 | | | | | | |
| Estimated average | burden | | | | | | |
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| Form 3 | Holaings Rep | ortea. | | | | | | | | | | | | | | | | |
|---|--|--|--|---|--|-------------------|---|------------------|---|---|---|--|--|------------|--|----|--|--|
| Form 4 | Transactions | Reported. | F | iled pursuant or Secti | to Sectio on 30(h) | on 16(a of the | a) of the Investn | Secur ment Co | ities Excha ompany Ac | nge Act t of 194 | of 19: | 34 | | | | | | |
| Name and Address of Reporting Person* O'Leary Richard | | | | INTE | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify | | | | | er | | |
| (Last) 521 WES | (F ST 57TH ST | , | (Middle) | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2018 | | | | | | | | X below) below) EVP & Chief Financial Officer | | | | | |
| (Street) NEW YO | ORK N | Y | 10019 | 4. If Ame | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (S | tate) | (Zip) | | Person | | | | | | | | | | | | | |
| | | Tab | le I - Non-Der | ivative Se | curitie | s Ac | quire | d, Dis | sposed | of, or | Ben | eficiall | y Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | Execution I | 2A. Deemed Execution Date, if any (Month/Day/Year) 3. Transa Code (8) | | Instr. | | | posed Of | 5. Amount of Securities Beneficially Owned at end Issuer's Fiscal | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | | | | | |
| | | | | | Amount (A) or (D) Price | | | | • | Year (Inst 4) | | | | (115411-4) | | | | |
| | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | Derivative Expiration | | Date Exercisable and cpiration Date Securities Underlying Derivative Sec (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | (A) | (D) | Date Exerci | isable | Expiratior Date | Title | Title All All Or No of SI | | | (Instr. 4) | | | | |
| Stock Equivalent Unit | (1) | 12/31/2018 | | A | 59.39 ⁽²⁾ | | (1 | 1) | (1) | Comi | | 59.39 | \$0.0000 | 3,62 | 4.39 | D | | |

Explanation of Responses:

- 1. The Stock Units ("Units") convert to Common Stock on a one-for-one basis.
- 2. Reflects the aggregate of fractional Units acquired during the period upon reinvestment of dividends under the Company's deferred compensation plan during 2018. The transactions were exempt pursuant to Rule 16a-11.

/s/ Nanci Prado, attorney in fact 02/14/2019

** 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.