FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	_ OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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* Fibig Andreas (Last) (First) (Middle) 521 WEST 57TH STREET (Street) NEW YORK NY 10019						2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] 3. Date of Earliest Transaction (Month/Day/Year) 10/29/2021 4. If Amendment, Date of Original Filed (Month/Day/Year)								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) CEO 6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)		State)	(Zip)			X Form filed by One Reporting Person Form filed by More than One Reporting Person								- 1					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Trans Date (Month/I	action 2A. Deemed Execution Date if any (Month/Day/Year)		Date,	Transaction Dispo Code (Instr. 5)		Disposed	ties Acquired (A) or I Of (D) (Instr. 3, 4 ar			5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Pric	Transactio					(111341. 4)		
Common Stock															78,384.549			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) 1. Title of Derivative Security Security (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. Conversion Date (Month/Day/Year) 5. Conversion Date (Month/Day/Year) 6. Conversion Date (Month/Day/Year)		Code (Instr.					Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Cod	ode	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber		(Instr. 4)	ion(a)		
Stock Equivalent Unit	(1)	10/29/2021			A		78.063 ⁽²⁾		(3)		(3)	Common Stock	78.0	063	\$147.45	64,363.	211	D	

Explanation of Responses:

- $1. \ The \ Stock \ Equivalent \ Units \ ("Units") \ convert \ to \ Common \ Stock \ on \ a \ one-for-one \ basis.$
- 2. Reflects Units under the Company's deferred compensation plan resulting from deferral of compensation, a company match 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, 2022.
- 3. The Units are payable in Common Stock upon earlier of termination of employment or January 1 following retirement.

/s/ Jennifer Johnson, attorney in 11/02/2021 fact

** Signature of Reporting Person

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.