FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL |
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Buck Linda B | | | | | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|--|---------------------|---|--------------------------|--|--|--------------------------------------|--|--------------------|--|--|---|---|--|---------------------------------------|--|
| <u>Back Emad B</u> | | | | | FRAGRANCES INC [IFF] | | | | | | | X Directo | | 10% O | · | |
| (Last) (First) (Middle) 521 WEST 57TH STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2015 | | | | | | \dashv | Officer below) | (give title | Other (below) | specify | |
| 521 WEST 5/TH STREET | | | | | 03/13/2013 | | | | | | | | | | | |
| (Street) | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| NEW YORK NY 10019 | | | | | | | | | | | | X Form filed by One Reporting Person | | | | |
| (City) (State) (Zip) | | | | - | | | | | | | | Form filed by More than One Reporting Person | | | rting | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| 1 Title of 9 | Security (Ins | tr 3) | 2. Tra | ansactio | on I | 2A. Deer | med | 3. | 4. Secur | ties Acquire | d (A) or | 5. Amoui | nt of 6. | Ownership | 7. Nature of | |
| Date (Month/D | | | | | - 1 | Execution Date, if any (Month/Day/Year | | Transaction Disposed Of (D) (Instr. 3, 4 | | | Securitie Beneficia Owned F | s Form ally (D) o ollowing (I) (In | | Indirect Beneficial Ownership | | |
| | | | | | | | | Code V | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 a | ion(s) | | (Instr. 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 | se (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | ate, Transac Code (Ir | | 5. Num Deriva Securi Acquir or Disp of (D) 3, 4 an | ities red (A) posed (Instr. | 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(s | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | (5) | | |
| Restricted Stock Units | (1) | 05/13/2015 | | D | | | 1,145 | 05/13/2015 | 05/13/2015 | Common Stock | 1,145 | \$0.0000 | 0.0000 | D | | |
| Stock Equivalent | (2) | 05/13/2015 | | A | | 1,145 | | (2) | (2) | Common | 1,145 | \$0.0000 | 13,887 | D | | |

Explanation of Responses:

- 1. The Restricted Stock Units convert to Common Stock on a one-for-one basis.
- 2. The reporting person is receiving 1,145 Units resulting from the deferral of 1,145 RSU's granted under the Non-Employee Director Compensation program which vested on May 13, 2015. The Units are being deferred until retirement or other termination of directorship. The Units are payable in Common Stock at the end of the deferral.

Nanci Prado, attorney in fact 05/13/2015

** 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.