Number of Shares

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No.  $\frac{3}{20}$ )\*

INTERNATIONAL FLAVORS & FRAGRANCES INC.
(Name of Issuer)
COMMON SHARES
(Title of Class of Securities)
459506101
(Cusip Number) 12/31/2001
(Date of Event Which Requires Filing of this Statement)
Check the appropriate box to designate the rule pursuant to which this Schedule is filed:
[X] Rule 13d-1(b) [ ] Rule 13d-1(c) [ ] Rule 13d-1(d)
*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.
The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).
Schedule 13G Page of Pages 11
CUSIP No459506101
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100
2. Check the appropriate box if a Member of a Group  (a) (b)X
3. SEC USE ONLY:
4. Citizenship or Place of Organization: Illinois
Number of 5. Sole Voting Power: 1,046,400

Owned by Each Reporting Person with 8. Shared Dispositive Power: 1,046,460  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,071,049  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		eficially 6. Shared Voting Power: 0	
9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,071,049 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	Eac	h 7. Sole Dispositive Power: 1,046,4	00
10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.12 %  12. Type of Reporting Person: IC  Schedule 136 Page of Class Represented by Amount in Row 9: 1.12 %  12. Type of Reporting Person in C  Schedule 136 Page of Class Represented by Amount in Row 9: 1.12 %  13. SEC USE ONLY:  14. Citizenship or Place of Organization: Illinois  Number of S. Sole Voting Power: 116,500 Shares Beneficially 6. Shared Voting Power: 116,500 Shares Beneficially 6. Shared Dispositive Power: 1,262  9. Aggregate Amount Beneficially Owned by each Reporting Person: 117,762  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 0.12 %  12. Type of Reporting Person: IC  Schedule 136 Page of Organization: Illinois  CUSIP No. 459506101  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a) (b) X  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of S. Sole Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Reporting Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9 excludes Certain Shares:  12. Type of Reporting Person: IC			9
11. Percent of Class Represented by Amount in Row 9: 1.12 %  12. Type of Reporting Person: IC  Schedule 136	9.	Aggregate Amount Beneficially Owned by each	 Reporting Person: 1,071,049
11. Percent of Class Represented by Amount in Row 9: 1.12 %  12. Type of Reporting Person: IC  Schedule 136	10.	Check Box if the Aggregate Amount in Row 9 e.	 xcludes Certain Shares:
22. Type of Reporting Person: IC  Schedule 136  Page of Pages  CUSIP No459506101  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090  2. Check the appropriate box if a Member of a Group (a) (a) (a)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 116,500  Shares Beneficially 6. Shared Dispositive Power: 116,500  Reporting Person With			
Schedule 136  Rage of Pages			_
CUSIP No459506101  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090  2. Check the appropriate box if a Member of a Group (a) (b)X  3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 116,500 Shares Beneficially 6. Shared Voting Power: 0 Whend by Each Person with 8. Shared Dispositive Power: 1,262  9. Aggregate Amount Beneficially Owned by each Reporting Person: 117,762  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: 11. Percent of Class Represented by Amount in Row 9: 0.12 %  12. Type of Reporting Person: IC Schedule 136			Davis of Davis
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090  2. Check the appropriate box if a Member of a Group (a)	Sch	edule 13G	Page OT Pages
State Farm Life Insurance Company 37-0533090  2. Check the appropriate box if a Member of a Group (a)	CUSI	P No459506101	
(a)	1.		
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Beneficially Owned by Carbon State Power: 0 Owned by Each Reporting Person With Row Power: 116,500 Reporting Person With Row Power: 1,262  9. Aggregate Amount Beneficially Owned by each Reporting Person: 117,762  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:			_
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9. Aggregate Amount Beneficially Owned by each Reporting Person: 117,762  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		orting	
10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		<u> </u>	
11. Percent of Class Represented by Amount in Row 9: 0.12 %  12. Type of Reporting Person: IC  Schedule 136  Page of Pages  11  CUSIP No459506101  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a) (b)X  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Owned by Each 7. Sole Dispositive Power: 0 Reporting Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 0.00 %			<u> </u>
12. Type of Reporting Person: IC  Schedule 13G  Page of Pages of Pages 11  CUSIP No459506101  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a) (b)X  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 0 Shares 6. Shared Voting Power: 0 Owned by Fach 7. Sole Dispositive Power: 0 Reporting Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: 11. Percent of Class Represented by Amount in Row 9: 0.00 %  12. Type of Reporting Person: IC			
Schedule 13G  Page of Pages  CUSIP No459506101  1. Name of Reporting Person and I.R.S. Identification No.:     State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group     (a) (b)X  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Owned by Each 7. Sole Dispositive Power: 0 Reporting Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 0.00 %			w 9: 0.12 % —
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a)	12.	Type of Reporting Person: IC	
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a)	Sch	edule 13G	Page of Pages 11
State Farm Fire and Casualty Company 37-0533080  2. Check the appropriate box if a Member of a Group (a)	CUSI	P No459506101	
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4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 0 Owned by Each 7. Sole Dispositive Power: 0 Reporting Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	2.	(a)	roup
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Person With 8. Shared Dispositive Power: 3,097  9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,097  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 0.00 %  12. Type of Reporting Person: IC	Eac	h 7. Sole Dispositive Power: 0	
10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:			
11. Percent of Class Represented by Amount in Row 9: 0.00 %  12. Type of Reporting Person: IC	9.	Aggregate Amount Beneficially Owned by each	 Reporting Person: 3,097
12. Type of Reporting Person: IC	10.		
	11.	Percent of Class Represented by Amount in Ro	 w 9: 0.00 %
5 11			— Page of Pages
-			5 11

CUSIP No. \_\_\_459506101

1.	Name of Reporting Person and I.R.S. Identif State Farm Investment Management Corp. 37-0	
2.	Check the appropriate box if a Member of a (a) (b)X_	Group
3.	SEC USE ONLY:	<del></del>
4.	Citizenship or Place of Organization: Delaw	ware
	nber of 5. Sole Voting Power: 681,000	
Ben	neficially 6. Shared Voting Power: 2,893	
Eac	,	00
	oorting son With 8. Shared Dispositive Power: 2,89	93
9.	Aggregate Amount Beneficially Owned by each	 n Reporting Person: 683,893
10.	Check Box if the Aggregate Amount in Row 9	<u> </u>
11.	Percent of Class Represented by Amount in R	Row 9: 0.72 % 
12.	Type of Reporting Person: IA	
Sch	nedule 13G	Page of Pages
CUSI	P No459506101	
1.	Name of Reporting Person and I.R.S. Identif State Farm Insurance Companies Employee Ret	
2.	Check the appropriate box if a Member of a (a) (b)X	Group
3.	SEC USE ONLY:	
4.	Citizenship or Place of Organization: Illin	nois
	ober of 5. Sole Voting Power: 1,106,100	
	nres neficially 6. Shared Voting Power: 0	
0wn Eac	ned by	100
Rep	oorting Son With 8. Shared Dispositive Power: 2,27	
9.	Aggregate Amount Beneficially Owned by each	
10.	Check Box if the Aggregate Amount in Row 9	
11.	Percent of Class Represented by Amount in R	Row 9: 1.16 %
12.	Type of Reporting Person: EP	
Sch	nedule 13G	Page of Pages
CUSI	P No459506101	
1.	Name of Reporting Person and I.R.S. Identif State Farm Insurance Companies Savings and Employees 37-6091823	
2.	Check the appropriate box if a Member of a (a) (b) _X_	Group
3.	SEC USE ONLY:	
4.	Citizenship or Place of Organization: Illin	nois
	nber of 5. Sole Voting Power: 651,000	
	neficially 6. Shared Voting Power: 0	

Each Repo	whed by Each 7. Sole Dispositive Power: 651,000 Exercise Serson With 8. Shared Dispositive Power: 0						
9.	Aggregate Amount Beneficially Owned by each Reporting Person: 651,000						
10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:						
11. I	Percent	of Class Represented by Amount in Row 9: 0.68 %					
12.	Type of	Reporting Person: EP					
Sche	Schedule 13G Page of Pages 8 11						
Item :	1(a) an	d (b). Name and Address of Issuer & Principal Executive Offices	:				
		INTERNATIONAL FLAVORS & FRAGRANCES INC. 521 WEST 57TH STREET NEW YORK, NEW YORK 10019-2960	_				
Item 2	2(a).	Name of Person Filing: State Farm Mutual Automobile Insurance					
		Company and related entities; See Item 8 and Exhibit A					
Item 2	2(b).	Address of Principal Business Office: One State Farm Plaza					
		Bloomington, IL 61710					
Item 2	2(c).	Citizenship: United States					
Item 2	2(d) an	d (e). Title of Class of Securities and Cusip Number: See above					
Item :	Item 3. This Schedule is being filed, in accordance with 240.13d-1(b).						
	See	Exhibit A attached.					
Item 4	Item 4(a). Amount Beneficially Owned: 3,635,171 shares						
Item 4	4(b).	Percent of Class: 3.83 percent pursuant to Rule 13d-3(d)(1).					
Item 4	4(c).	Number of shares as to which such person has:					
	(	i) Sole Power to vote or to direct the vote: 3,601,000 ii) Shared power to vote or to direct the vote: 2,893 iii) Sole Power to dispose or to direct disposition of: 3,601,00 iv) Shared Power to dispose or to direct disposition of: 34,171	Θ				
Item !	5. Own	ership of Five Percent or less of a Class: yes; see item 4(b)					
Item (	6. Ownership of More than Five Percent on Behalf of Another Person: N/A						
Item '	m 7. Identification and Classification of the Subsidiary Which Acquired						
	the	Security being Reported on by the Parent Holding Company: N/A					
Item 8	em 8. Identification and Classification of Members of the Group:						
	See	Exhibit A attached.					
Item 9	9. Not	ice of Dissolution of Group: N/A					
Sche	dule 13	G Page of Pages					

acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

01/25/2002

Date

STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

STATE FARM INSURANCE COMPANIES EMPLOYEES RETIREMENT TRUST

STATE FARM LIFE INSURANCE COMPANY

STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR

STATE FARM FIRE AND CASUALTY COMPANY

U.S. EMPLOYEES
STATE FARM ASSOCIATES FUNDS

STATE FARM INVESTMENT MANAGEMENT CORP.

TRUST - STATE FARM GROWTH FUND

STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND

STATE FARM MUTUAL FUND TRUST

STATE FARM VARIABLE PRODUCT TRUST

/s/ Paul N. Eckley

Paul N. Eckley, Fiduciary of each of the above

Schedule 13G

/s/ Paul N. Eckley

Paul N. Eckley, Vice President of each of the above

Page \_\_\_\_ of \_\_\_ Pages

## EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company which might be deemed to constitute a "group" with regard to the ownership of shares reported herein. By way of explanation, State Farm Mutual Automobile Insurance Company is the parent of wholly owned subsidiaries, State Farm Life Insurance Company, which is the parent of the wholly owned subsidiary State Farm Life and Accident Assurance Company; State Farm Fire and Casualty Company; and, State Farm Investment Management Corp. State Farm Investment Management Corp. acts as the investment advisor to State Farm Associates Funds Trust - State Farm Growth Fund and State Farm Associates Funds Trust - State Farm Balanced Fund , State Farm Variable Product Trust, and State Farm Mutual Fund Trust. The Investment Committees of the Board of Directors of each of the insurance companies and of the State Farm Investment Management Corp. and the Trustees of the State Farm Insurance Companies Employee Retirement Trust, State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees, State Farm Variable Product Trust, and State Farm Mutual Fund Trust are vested with the responsibility for investing the assets of the companies, the Funds, the Trusts, and the Equities Account and the Balanced Account of the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees. State Farm Mutual Automobile Insurance Company employs all personnel of the Investment Department. State Farm Investment Management Corp. has a written agreement with State Farm Mutual Automobile Insurance Company whereby the Investment Department personnel assist State Farm Investment Management Corp. in its duties as investment advisor to the Funds, State Farm Variable Product Trust, and State Farm Mutual Fund Trust. Investment actions taken by the Investment Department are ratified by the Investment Committees of the Boards of Directors of

the insurance companies and State Farm Investment Management Corp. and by the Trustees of the Trusts and the Plan. Certain members of the Investment Department also execute voting proxies from time to time but in situations where a vote contrary to that of management on a major policy matter is under consideration, approval of the Investment Committees of the Boards of Directors of the Companies involved is first obtained.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

Schedule 13G	Page	of Pages
Name	Classification Under Item 3	
State Farm Mutual Automobile Insurance Company	y IC IC	1,071,049 shares
State Farm Life Insurance Company State Farm Life and Accident Assurance Company		117,762 shares 0 shares
State Farm Fire and Casualty Company	IC	3,097 shares
State Farm Investment Management Corp.	IA	0 shares
State Farm Associates Funds Trust - State		
Farm Growth Fund	IV	561,000 shares
State Farm Associates Funds Trust - State		,
Farm Balanced Fund	IV	120,000 shares
State Farm Variable Product Trust	IV	2,893 shares
State Farm Insurance Companies Employee		
Retirement Trust	EP	1,108,370 shares
State Farm Insurance Companies Savings and	ED.	
Thrift Plan for U.S. Employees	EP	492,000 shares
Equities Account Balanced Account		159,000 shares
State Farm Mutual Fund Trust	IV	0 shares
State Farm Hataar Fana 11 ast		
		3,635,171 shares