Instruction 1(b)

## FORM 4

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

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

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

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>IN</u> <u>F</u> ]	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ]  3. Date of Earliest Transaction (Month/Day/Year) 05/30/2019									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  EVP, GC, & Corp. Sec'y							
(Street) NEW Y(			10019 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
		Tal	ole I - Nor	ı-Deri	vativ	e Se	curities	A C	quir	ed, I	Disp	osed of	f, or Be	nefici	ally	Owned					
1. Title of Security (Instr. 3)			2. Tran Date (Month		- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		΄   c₀	Transaction Code (Instr.					1 and Securitie Beneficia Owned F		s Ily ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Co	ode	v	Amount	(A) o	Pric	e:e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock															39,399.37			D			
Common	Common Stock															4,461.579			I	By 401k	
			Table II -									sed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3)	Conversion Date Execu or Exercise (Month/Day/Year) if any		3A. Deemed	l Pate,	4. Transa	5. Nu Deriv Secu Acqu or Dis of (D)		5. Number of 6. Derivative E		6. Date Exercisa Expiration Date (Month/Day/Year		ble and 7. Title and Amount of		nd of s ng e Secur	8	s. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported	e S Illy	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisab		Expiration Date	Title	Amou or Numb of Share	oer		Transaction(s) (Instr. 4)				
Stock Equivalent Unit	(1)	05/30/2019		A			23.36 <sup>(2)</sup>		(3)			(3)	Common Stock	23.3	36	\$135.17	7,088.96		D		
Purchased Restricted Stock Units	(4)								04/0	01/202	2 (	04/01/2022	Common Stock	4,13	35		4,135	5	D		
Purchased Restricted Stock Units	(4)								04/0	02/202	1 0	04/02/2021	Common Stock	3,85	54		3,854		D		

## **Explanation of Responses:**

(4)

Purchased Restricted

Units

- 1. The Stock 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 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.

04/03/2020

- 3. The Units are payable in Common Stock upon earlier of termination of employment or January 1 following retirement.
- 4. The Purchased Restricted Stock Units ("PRSUs") convert to Common Stock on a one-for-one basis.

/s/ Nanci Prado, attorney in fact 06/03/2019

4.105

D

\*\* Signature of Reporting Person

4,105

Common

04/03/2020

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.