FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	1

STATEMENT	OF	CHANGES	N RENE	FICIAI	OWNERSHIP
SIAILMLNI	OI.	CHANGES	IA DEIAFI	ICIAL	CAMINETIZOLILE

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

Name and Address of Reporting Person* Jilla Rustom					IN	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 X Officer (give title Other (specify					
(Last) (First) (Middle) 521 WEST 57TH STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/12/2021								Leading below) below) CFO					
(Street) NEW YORK NY 10019				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Zip)											1 010011					
		Tak	le I - Nor	ı-Deri	vativ	e Se	curities A	Acq	uired,	Disp	osed of,	or Bene	ficially	Owned					
			Date	nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis		4. Securitie Disposed C	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		4 and 5) Securities Beneficia Owned Fo		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 ar				(Instr. 4)		
Common S	non Stock											3,548			D				
		•	Table II -								sed of, c			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	d Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisal Expiration Date (Month/Day/Year		isable and 7. Title and A of Securities		d Amount es 3 Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s illy	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Stock Equivalent Unit	(1)	02/12/2021			A 17.716 ⁽²⁾ (3) (3) Common Stock 17.716		\$134.06	399.512		D									
Purchased Restricted Stock Units	(4)								04/06/2	023	04/06/2023	Common Stock	1,599		1,599	9	D		
Restricted Stock Units	(5)								01/02/2	021	01/02/2023	Common Stock	2,944		2,94	4	D		
Restricted Stock Units	(5)								04/06/2	.023	04/06/2023	Common Stock	2,475		2,47	5	D		
Stock Settled Appreciation	\$135.84								01/02/2	021	02/03/2027	Common	11,042		11,04	2	D		

Explanation of Responses:

Rights

- 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 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.
- 4. The Purchased Restricted Stock Units ("PRSUs") convert to Common Stock on a one-for-one basis.
- 5. The Restricted Stock Units ("RSUs") convert to Common Stock on a one-for-one basis.

/s/ Nanci Prado, attorney in fact 02/17/2021

** 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.