## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
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OMB APPROVAL								
OMB Number:	3235-036							
Estimated average	hurdon							

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3 Holdings Reported

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP** 

32 hours per response: 1.0

Eiled purguent to Section 16(a) of the Securities Evolution Act of 1034

Form 4	1 Transactions	Reported.	ГІІ	or Sectio					Company Ac							
1. Name and Address of Reporting Person* <u>DUNSDON JAMES H</u>			INTER	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ]						5. Relationship of Reporting P (Check all applicable) Director			10%	Owner		
INC.	IATIONAL	FLAVORS & F	(Middle) RAGRANCES		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004						/ear)	X Officer (give title Other (specify below)  Chief Operating Officer				
521 WEST 57TH STREET  (Street)  NEW YORK NY 10019				4. If Amer	· · · · · · · · · · · · · · · · · · ·					6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(S	·	(Zip)													
		Tab	le I - Non-Deri	vative Sec	uriti	es A	cquire	d, D	isposed	of, or l	3eneficia	ally Owne	ed			
Date (Month/Day/Year)		Execution D			Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			5. Amou Securition Benefici Owned a	es Owr ially Forr		rship : Direct	7. Nature of Indirect Beneficial Ownership		
			(World II/Day)	nontinbay/ rear j			Amοι	ount (A) or (D)		Price	Issuer's		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
		Ta	able II - Deriva (e.g., p	tive Secu outs, calls								y Owned				
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution or Exercise (Month/Day/Year) if any		3A. Deemed Execution Date, if any (Month/Day/Year)	on Date, Transaction Code (Instr.	n of Expira		Expiration	te Exercisable and ration Date th/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Stock Equivalent	(1)	12/31/2004		А	156		(2)		(2)	Commo	1 156	\$0	10.513	g(3)	D	

## **Explanation of Responses:**

- 1. The stock units convert to Common Stock on a one-for-one basis.
- 2. Not applicable.
- 3. Includes units acquired upon reinvestment of dividends accrued on units in the IFF Stock Fund under the Company's deferred compensation plan during 2004. The acquisition of units with reinvested dividends is exempt from line item reporting under SEC Rule 16a-11. The unit accounting process used by the plan administrator of the IFF Stock Fund under the deferred compensation plan includes Common Stock as well as cash, with the fund divided into a number of units which does not directly correspond to the same number of shares of Common Stock. This leads to Common Stock maintained in the fund, as well as dividend reinvestment share units, to at times be in minor variance from the numbers reported in a different period.

Dennis M. Meany, Attorney-in-02/10/2005

\*\* 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.