FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Fibig Andreas					<u>I</u>	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF]									k all application	onship of Reporting Fall applicable) Director		10% Ov	vner
(Last) 521 WES	(F ST 57TH S	irst) ΓREET	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2021								X	Officer below)	(give title	ЕО	Other (s below)	specify
(Street) NEW YO		Y state)	10019 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Indi ne) X	Form filed by More than One Reporting Person Form filed by More than One Reporting Person					
		Та	ble I - Nor	n-Deriv	vativ	/e Se	curities	Acq	uired,	Dis	posed of	f, or Be	neficia	lly	Owned				
Dat			2. Trans Date (Month/	saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp			ies Acquir Of (D) (Ins	ed (A) or tr. 3, 4 ar	and Securitie Beneficia Owned F		lly ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount (A) or (D)		Price		Reported Transaction(s) (Instr. 3 and 4)						
Common Stock														65,614.398			D		
			Table II -				urities A ls, warra	•	,	•	,			•	wned				•
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			ate, T	ransa code (ansaction Derivative Securities			6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			ties ng e Securit	Derivative Security urity (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er		(Instr. 4)	on(s)		
Stock Equivalent Unit	(1)	03/15/2021			A		1,944 ⁽²⁾		(3)		(3)	Common Stock	1,94	4	\$136.79	62,003.9	962	D	
Stock Equivalent	(1)	03/15/2021			A		49.498 ⁽⁴⁾		(3)		(3)	Common	49.49	8	\$136.79	62,053.	.46	D	

Explanation of Responses:

- 1 The Stock Equivalent Units ("Units") convert to Common Stock on a one-for-one basis
- 2. These Units represent the deferral of the 50% portion of the reporting person's payout under the 2018-2020 Long Term Incentive Plan ("LTIP") cycle settled in shares of the issuer's common stock. The number of shares was determined based on the average closing market price of the issuer's common stock for the twenty trading days prior to January 2, 2018, the first stock trading day of the LTIP cycle.
- 3. The Units are payable in Common Stock upon earlier of termination of employment or January 1 following retirement.
- 4. 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.

/s/ Nanci Prado, attorney in fact 03/17/2021

** 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.