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SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G

18

(A fee is not being paid with this statement)

INTERNATIONAL FLAVORS & FRAGRANCES INC.

(Issuer)

COMMON SHARES

(Title of Class of Securities)

459506101

(Cusip Number)

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.

John P. Elterich Investment Department State Farm Insurance Companies One State Farm Plaza Bloomington, IL 61710 (309) 766-9831

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- Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100
 Member of a Group: (a)____(b)_X__
- 3. SEC USE ONLY:
- 4. Citizenship or Place of Organization: Illinois
- 5. Sole Voting Power: 3,538,200
- 6. Shared Voting Power: 0
- 7. Sole Dispositive Power: 3,538,200
- 8. Shared Dispositive Power: 0
- 9. Aggregate Amount Beneficially Owned by each Reporting person: 3,538,200

- 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____
- Percent of Class Represented by Amount in Row 9: 3.36 % 11.
- Type of Reporting Person: IC 12.
- 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090 2. Member of a Group: (a)____(b)__X_
- 3. SEC USE ONLY:
- Citizenship or Place of Organization: Illinois 4.
- Sole Voting Power: 116,500 5.
- 6. Shared Voting Power: 0
- 7. Sole Dispositive Power: 116,500
- 8. Shared Dispositive Power: 0
- Aggregate Amount Beneficially Owned by each Reporting person: 116,500 9.
- Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____ 10.
- Percent of Class Represented by Amount in Row 9: 0.11 % 11.
- 12. Type of Reporting Person: IC

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- Name of Reporting Person and I.R.S. Identification No.: 1.
- State Farm Fire and Casualty Company 37-0533080
- 2. Member of a Group: (a)____(b)__X_
- SEC USE ONLY: 3.
- Citizenship or Place of Organization: Illinois 4.
- 5. Sole Voting Power: 480,000
- Shared Voting Power: 0 6.
- 7. Sole Dispositive Power: 480,000
- Shared Dispositive Power: 0 8.
- 9. Aggregate Amount Beneficially Owned by each Reporting person: 480,000
- 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____
- Percent of Class Represented by Amount in Row 9: 0.45 % 11.
- 12. Type of Reporting Person: IC
- 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Investment Management Corp. 37-0902469 2.
- Member of a Group: (a)____(b)__X_
- 3. SEC USE ONLY:
- 4. Citizenship or Place of Organization: Delaware
- Sole Voting Power: 681,000 5.
- 6. Shared Voting Power: 1838
- 7. Sole Dispositive Power: 681,000
- Shared Dispositive Power: 1838 8.

9. Aggregate Amount Beneficially Owned by each Reporting person: 682,838

10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____

11. Percent of Class Represented by Amount in Row 9: 0.64 %

12. Type of Reporting Person: IA

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Name of Reporting Person and I.R.S. Identification No.: 1. State Farm Insurance Companies Employee Retirement Trust 36-6042145 Member of a Group: (a)____(b)__X__ 2. 3. SEC USE ONLY: Citizenship or Place of Organization: Illinois 4. Sole Voting Power: 1,561,500 5. 6. Shared Voting Power: 0 Sole Dispositive Power: 1,561,500 7. 8. Shared Dispositive Power: 0 Aggregate Amount Beneficially Owned by each Reporting person: 1,561,500 9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____ 10. Percent of Class Represented by Amount in Row 9: 1.48 % 11. 12. Type of Reporting Person: EP Name of Reporting Person and I.R.S. Identification No.: 1. State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823 Member of a Group: (a)____(b)__X__ 2. SEC USE ONLY: 3. Citizenship or Place of Organization: Illinois 4. Sole Voting Power: 651,000 5. 6. Shared Voting Power: 0 Sole Dispositive Power: 651,000 7. 8. Shared Dispositive Power: 0 Aggregate Amount Beneficially Owned by each Reporting person: 651,000 9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: ____ 10. 11. Percent of Class Represented by Amount in Row 9: 0.61 % Type of Reporting Person: EP 12. Page _____ of ____ Pages Item 1(a) and (b). Name and Address of Issuer: INTERNATIONAL FLAVORS & FRAGRANCES INC. 521 WEST 57TH STREET NEW YORK, NEW YORK 10019

Item 2(a). Name of Person Filing: State Farm Mutual Automobile Insurance

Company and related entities; See Item 8 and Exhibit A

Item 2(b). Address of Principal Business Office: One State Farm Plaza

Bloomington, IL 61710

Item 2(c). Citizenship: United States

Item 2(d) and (e). Title of Class of Securities and Cusip Number: See above.

Item 3. This Schedule is being filed, in accordance with 240.13d-1(b). See Exhibit A attached.

Item 4(a). Amount Beneficially Owned: 7,030,038 shares on 12/31/1999

Item 4(b). Percent of Class: 6.68 percent pursuant to Rule 13d-3(d)(1).

Item 4(c). Number of shares as to which such person has: The persons

identified in Exhibit A hereto have sole power to vote or to direct the vote and to dispose or to direct the disposition of all shares reported hereby.

Item 5. Ownership of Five Percent or less of a Class: Not Applicable.

Item 6. Ownership of More than Five Percent on Behalf of Another Person: N/A

- Item 7. Identification and Classification of the Subsidiary Which Acquired the Security being Reported on by the Parent Holding Company: N/A
- Item 8. Identification and Classification of Members of the Group: See Exhibit A attached.

Item 9. Notice of Dissolution of Group: N/A

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Item 10. Certification. The undersigned certify that, to the best of his knowledge and belief, the securities referred to above were 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 his knowledge and belief, the undersigned certifies that the information set forth in this statement is true, complete and correct.

02/04/2000

Date

STATE FARM VARIABLE PRODUCT TRUST

STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST

STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES

CORP.

STATE FARM GROWTH FUND, INC.

STATE FARM BALANCED FUND, INC.

INSURANCE COMPANY

STATE FARM LIFE INSURANCE COMPANY

STATE FARM INVESTMENT MANAGEMENT

STATE FARM FIRE AND CASUALTY COMPANY

STATE FARM MUTUAL AUTOMOBILE

Paul N. Eckley, Fiduciary of each of the above

Paul N. Eckley, Vice President of each of the above Page _____ of ____ Pages 7 8

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, and State Farm Fire and Casualty Company, which in turn is the parent of the wholly owned subsidiary State Farm Investment Management Corp. State Farm Investment Management Corp. acts as the investment advisor to State Farm Growth Fund, Inc., State Farm Balanced Fund, Inc.and the State Farm Variable Product 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 and State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 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 and the State Farm Variabale Product Trust. Investment actions taken by the Investment Department are ratified by the Investment Committees of the Boards of Directors of the insurance companies and the Management Corporation and by the Trustees of the

Trustsand 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".

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		Number of Shares Based
	Classification	
Name	Under Item 3	
Nalio		of Caro
State Farm Mutual Automobile Insurance Compa	ny IC	3,538,200 shares
State Farm Life Insurance Company	IC	116,500 shares
State Farm Life and Accident Assurance Compa	ny IC	0 shares
State Farm Fire and Casualty Company	IC	480,000 shares
State Farm Investment Management Corp.	IA	0 shares
State Farm Growth Fund, Inc.	IV	561,000 shares
State Farm Balanced Fund, Inc.	IV	120,000 shares
State Farm Variable Product Trust	IV	1,838 shares
State Farm Insurance Companies Employee		
Retirement Trust	EP	1,561,500 shares
State Farm Insurance Companies Savings and		
Thrift Plan for U.S. Employees	EP	
Equities Account		492,000 shares
Balanced Account		159,000 shares
		7,028,200 shares