FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

	nd Address o Lan Kevir	IN	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF]									ck all appl Direct	or (give title		rson(s) to Issuer 10% Owner Other (specify below)					
(Last) (First) (Middle) 521 WEST 57TH STREET						3. Date of Earliest Transaction (Month/Day/Year) 03/15/2012									EVP & Chief Financial Officer					
(Street) NEW YORK NY 10019					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(City)	(\$	State)	(Zip)												Form Perso		e than	n One Reporting		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						r) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Benefic Owned	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) (D)			or Pr	ice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)					
Common Stock 03/15/2									A		8,356	(1) A	\$(0.0000	00 43,464			D		
Common Stock 03/15/2						2012					3,370	(2) D		\$30.6	40	0,094		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,		Transaction Code (Instr.		n of l		ercis n Date ay/Yea		Amount Securitie Underlyi Derivativ	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		B. Price of Derivative Gecurity Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	/ G	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shai	ber						
Stock Equivalent Unit	(3)	03/15/2012	03/16/	/2012	A		36		(4)		(4)	Common	3	6	\$57.22	11,834		D		

Explanation of Responses:

- 1. These shares represent the 50% portion of the reporting person's payout under the 2009-2011 Long Term Incentive Plan ("LTIP") cycle settled in shares of the Issuer's common stock. The number of shares was determined using the closing market price on January 2, 2009, the first trading day of the cycle.
- 2. Shares withheld to satisfy tax withholding obligations in connection with the receipt of shares under the LTIP, determined using the closing market price on January 2, 2009.
- 3. The Stock Units ("Units") convert to Common Stock on a one-for-one basis.
- 4. Units under the Company's deferred compensation plan resulting from (a) deferral of compensation and Company match (in shares), (b) premium (in shares) to participants deferring compensation into Units and (c) dividends (in shares) on Units. 7 of the acquired Units are subject to vesting based on employment through December 31, 2013

By: Jodie Simon Friedman, attorney in fact

03/16/2012

** 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.