FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, I	D.C. 20549
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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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

1. Name and Address of Reporting Person*  Johnson Jennifer Amy						2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ]								Check all	onship of Reportir Il applicable) Director Officer (give title		Person(s) to Is  10% Over (s)	wner		
(Last) 521 WES	(Last) (First) (Middle) 521 WEST 57TH STREET					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024									below)  EVP, Gener		below)			
(Street) NEW YORK NY 10019 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Indiv. Line)  X  Rule 10b5-1(c) Transaction Indication										ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially O	wned					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/						eemed ution D th/Day/	ate,	Transaction		4. Securities Acquired (ADisposed Of (D) (Instr. 35)			nd Se Be Ov	5. Amount of Securities Beneficially Owned Following Reported		orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o	r Price	Tra	nsaction(s) str. 3 and 4)			(Instr. 4)		
Common Stock 03/01/20						024			A		195 <sup>(1)</sup> A		\$0.0	000	0 5,278		D			
Common Stock 03/01/20					024				F		81(2)	D	\$75.	.88	5,197		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)	if any	eemed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		of Deriv	r osed ) r. 3, 4	6. Date Expira (Month	tion D		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	8. Price Derivat Securit (Instr. 5	ve derivati / Securiti	ve es ially ng ed etion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares									

## **Explanation of Responses:**

- 1. These shares represent the 50% portion of the reporting person's payout under the 2021-2023 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 1, 2021, the first stock trading day of the LTIP cycle.
- 2. Shares withheld to satisfy tax withholding obligations in connection with the receipt of shares under the LTIP.

/s/ Jennifer Johnson

03/05/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.