## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF | CHANGES | IN BI | ENEFICIAL | OWNERS | HIP |
|-----------|----|---------|-------|-----------|--------|-----|
|           |    |         |       |           |        |     |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person*     O'Leary Richard                        |                   |                          |   |       | IN                                      | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ] |               |       |  |        |   |                     |  |  | ck all appl<br>Direct   | ,     | g Pers   | son(s) to Iss<br>10% Ov<br>Other (s                 | vner |
|--|-------------------|--------------------------|---|-------|---|--|---------------|-------|--|--------|---|---------------------|--|--|---|-------|--|---|------|
| (Last) 521 WES   | (Fi<br>ST 57TH ST | , ,                      |   |       |   | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2016                                |               |       |  |        |   |                     |  |  | X Officer (give title Other (specify below)  Controller   |       |  |   |      |
| (Street)  NEW Y(   |                   |                          | 10019<br>(Zip)  |       | - 4. I                                  | . , , , ,  |               |       |  |        |   | Line)               | Individual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |   |       |  |   |      |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                   |                          |   |       |   |  |               |       |  |        |   |                     |  |  |   |       |  |   |      |
| Date   |                   |                          | 2. Transa<br>Date<br>(Month/D                               |       | Execution Da<br>ly/Year) if any         |  | ecution Date, |       | Transaction Do   |        | Securities Acquired (A) of sposed Of (D) (Instr. 3, 4 |                     |  | and 5) Securities<br>Beneficial<br>Owned Fo    |   | Form  | : Direct<br>Indirect<br>str. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |      |
|  |                   |                          |   |       |   |  |               | Code  | v  | Amount | (A) o   | r Pr                | ice  | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   |       |  | (Instr. 4)  |      |
| Common Stock 03/15/  |                   |                          | /2016   | 2016  |   | A  |               | 1,570 | (1) A  | \$     | 0.0000  | 18                  | 8,756  |  | D   |       |  |   |      |
| Common   | Stock             |                          |   | 03/15 | /2016                                   |  |               |       | F  |        | 581 <sup>(2</sup>                                     | ) D                 | \$   | \$110.3 18,175 D                               |   |       | D  |   |      |
|  |                   | Т                        | able II -   |       |   |  |               |       |  |        |   | , or Ber<br>ble sec |  |  | Owned   |       |  |   | •    |
| Derivative Conversion Da   |                   | Date (Month/Day/Year) if | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |       | 4.<br>Transaction<br>Code (Instr.<br>8) |  | n of E        |       | 6. Date Exercisal<br>Expiration Date<br>(Month/Day/Year) |        | Amount of   |                     | S<br>(I  | . Price of<br>erivative<br>ecurity<br>nstr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y I   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)               |      |
|  |                   |                          |   |       | Code                                    | v  | (A)           | (D)   | Date<br>Exercisab  |        | Expiration<br>Date                                    | Title               | Amo<br>or<br>Num<br>of<br>Shar   | ber  |   |       |  |   |      |
| Stock<br>Equivalent  | (3)               | 03/15/2016               | 03/16/  | /2016 | A                                       |  | 15            |       | (4)  |        | (4)   | Common<br>Stock     | 1  | 5  | \$110.3   | 1,159 |  | D   |      |

## **Explanation of Responses:**

- 1. These shares represent the 50% portion of the reporting person's payout under the 2013-2015 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, 2013, 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.
- 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. 3 of the acquired Units are subject to vesting based on employment through December 31, 2017

03/17/2016 Nanci Prado, attorney in fact

\*\* 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.