FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	,		

OMB APP	ROVAL									
OMB Number:	3235-028									
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0.5

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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 Se	ction 30(h) of the in	vestme	nt Cor	npany Act of 1	940					
1. Name and Address of Reporting Person*  Fibig Andreas  (Last) (First) (Middle)			2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ]							S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) 521 WEST 57T	, ,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/02/2016						X	Officer (give title below)  CEO  Other (specify below)			
(Street) NEW YORK NY 10019				4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person			
(City)	(State)	(Zip)									Form filed by More than One Reporting Person			
		Table I - No	n-Deriva	tive S	Securities Acq	uired,	Dis	posed of, c	or Ben	eficially (	Owned			
Date		2. Transac Date (Month/Da	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock 05/				2016		A		2.086(1)	A	\$119.81	28,796	D		

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., p. e.g., c. e.														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exerci Expiration Dat (Month/Day/Ye	te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				
Purchased Restricted Stock Units	(2)	05/02/2016		A		6,009		04/02/2019	04/02/2019	Common Stock	6,009	\$0.0000	6,009	D	
Restricted Stock Units	(3)	05/02/2016		A		11,685		04/02/2019 <sup>(3)</sup>	04/02/2019 <sup>(3)</sup>	Common Stock	11,685	\$0.0000	11,685	D	

## Explanation of Responses:

- 1. Represents shares purchased from the Issuer under the Equity Choice Program. These shares are placed into escrow in connection with the matching grant of purchased restricted stock units. These shares are fully vested.
- 2. Represents matching grant of purchased restricted stock units under the Equity Choice Program, all of which will vest on April 2, 2019. The purchased restricted stock units convert to Common Stock on a one-for-one basis.
- 3. The Restricted Stock Units convert to Common Stock on a one-for-one basis. The Restricted Stock Units vest on April 2, 2019.

Nanci Prado, attorney in fact 05/04/2016

\*\* 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.