FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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

| | | | | | | | () | | | | 1 7 | | | | | | | | | |
|---|---|--|--|---------|-------|--|--------|---|------------------|--------------------------|----------------------|---|----------------|-----------------------------------|--|-----------------------------|---|---|--|--|
| 1. Name and Address of Reporting Person* <u>Cantlon Angelica T.</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] | | | | | | | | | (Check all app Direct | | licable) | 10 | Person(s) to Issuer 10% Owner Other (specify | |
| (Last) (First) (Middle) 521 WEST 57TH STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2013 | | | | | | | | | X Officer (give title Officer (specify below) below) SVP, Human Resources | | | | | |
| (Street) NEW YORK NY 10019 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indivi ine) X | Form | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tab | le I - No | n-Deriv | ative | Sec | uritie | s Ac | quired | , Dis | sposed o | f, or | Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | y/Year) Execu | | a. Deemed ecution Date, any onth/Day/Year) | | | | ies Acquired (A) o Of (D) (Instr. 3, 4 | | | and 5) Secur Bene | | cially I Following | 6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4) | of Indirect | |
| | | | | | | | | | | v | Amount | (A (D |) or) | Price | | Transa | action(s) 3 and 4) | | (1130.4) | |
| Common Stock 03/15/2 | | | | | | :013 | | А | | 3,372(1 |) | A | \$0.0000 | | 50,107 | | D | | | |
| Common Stock 03/15/2 | | | | | 2013 | 2013 | | F | | 1,247(2 | | D | \$42.01 | | 48,860 | | D | | | |
| | | Ta | | | | | | | | | osed of, onvertib | | | | y Ov | vned | | | | |
| L. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deer Executio) if any (Month/E | n Date, | | Transaction Code (Instr. | | n of | | Exerci on Da Day/Y | | | | 8. Pri Deriv Secu (Instr | ative rity | ve derivative Securities | Ownersh Form: Direct (D or Indirec (I) (Instr. | Beneficial Ownership ct (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | or Nu of | ount mber ares | | | | | | |

Explanation of Responses:

- 1. These shares represent the 50% portion of the reporting person's payout under the 2010-2012 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 4, 2010, 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 4, 2010.

By: Jodie Simon Friedman, attorney in fact 03/19/2013

** 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.