FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL
- 1	

OMB Number: 3235-0287 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

							,	iivesiiieii e								
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS &							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>HUDSON KATHERINE M</u>					FRAGRANCES INC [IFF]							X Directo	r	10	% Ow	ner
						<u></u>							(give title		Other (specif below)	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 04/30/2016							below)		DE	iow)	
521 WEST 57TH STREET																
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
NEW YO	ORK N	V	10019								- 1	,	led by One	Reporting F	erson	
												Form fi	led by More	than One	Report	ing
(City)	(City) (State) (Zip)											Person				
		Tal	ole I - Non-	Derivat	ive S	curitie	es Acc	quired, Di	sposed	of, or Ber	neficiall	y Owned				
1. Title of S	Security (Ins	tr. 3)		2. Transact	ion	2A. Deei		3.		ities Acquire		5. Amou		6. Ownersh		. Nature of
Date (Month/I				Date (Month/Day	ay/Year) Execution Date,			Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			r. 3, 4 and	Securitie Beneficia		Form: Direc (D) or Indire		Indirect Beneficial
`					(Month/Day/Year) 8)						Owned F		(I) (Instr. 4)		wnership nstr. 4)	
								Code V	Amoun	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		'	
			Tabla II D					inad Dia		: au Bana	. fi a i a II		<u> </u>		<u> </u>	
			Table II - D 6)					options,				Ownea				
1. Title of 2. 3. Transaction 3A. Deemed 4.								6. Date Exercisable and 7. Title and				8. Price of	9. Number			11. Nature
Derivative Security	Conversion or Exercise		Execution Da if any		saction e (Instr.			Expiration D (Month/Day/	Amount o		Derivative Security	derivative Securities	Owne		Beneficial	
(Instr. 3)	Price of Derivative		(Month/Day/Y		•	Acquired (A) or Disposed		Underlying Derivative Sec				(Instr. 5)	Beneficially Owned	y Direc	Direct (D)	Ownership (Instr. 4)
Security						of (D) (Instr. 3, 4 and 5)		(Instr. 3 and 4)					Following Reported			(111301. 4)
						0, 1 44.	1 1			+	Amount	-	Transaction (Instr. 4)	n(s)		
											or Number		(
				6-4	_ _	₍₀₎	_,	Date	Expiration		of					
				Cod	e V	(A)	(D)	Exercisable	Date	Title	Shares					
Restricted Stock Units	(1)	04/30/2016		D			1,295	04/30/2016	04/30/201	Common Stock	1,295	\$0.0000	0.0000	1)	
Stock Equivalent Unit	(2)	04/30/2016		A		1,295		(3)	(3)	Common Stock	1,295	\$0.0000	16,038	1)	

Explanation of Responses:

- 1. The Restricted Stock Units convert to Common Stock on a one-for-one basis.
- 2. The Stock Units ("Units") convert to Common Stock on a one-for-one basis.
- 3. The reporting person is receiving 1,295 Units resulting from the deferral of 1,295 RSUs granted under the Non-Employee Director Compensation Program which vested on April 30, 2016. The Units are being deferred until retirement or other termination of directorship. The Units are payable in Common Stock at the end of the deferral.

05/02/2016 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.