FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* Berryman Kevin C (Last) (First) (Middle) 521 WEST 57TH STREET					2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] 3. Date of Earliest Transaction (Month/Day/Year) 02/11/2010												All application of the control of th	nship of Reporting Person(s) to Issuer I applicable) Director 10% Owner Officer (give title Other (specify below) EVP & Chief Financial Officer			
(Street) NEW YO	-	4. If Amendment, Date of Original Filed (Month/Day/Year)											ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
Table I - Nor 1. Title of Security (Instr. 3)					saction 2. /Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		ar)	3. Transaction Code (Instr.		4. Secur	rities A ed Of (I	ities Acquired (A) d Of (D) (Instr. 3, 4		or Securit Benefic Owned Report Transa		ount of ties cially (I ted action(s)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock					/2010				1	A		732 ⁽			\$	0	(Instr. 3 and 4) 6,054		D		
Common Stock					1/2010					F		318	(2) D \$		\$48	3.92	5,736		D		
		Т	able II -	Deriva (e.g., p													wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (I 8)		n of		Expi	ate Exer iration D nth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O Fo O (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable	Ex Da	epiration ate	Title	0 N	Amoun or Numbe of Shares	r					
Stock Equivalent	\$0 ⁽³⁾	02/11/2010	02/12/2	2010	A		69			(4)		(4)	Com		69	4	641.69	1,338		D	

Explanation of Responses:

- 1. These shares represent the 50% portion of the reporting person's payout under the 2007-2009 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 3, 2007, 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 3, 2007.
- 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. 14 of the acquired Units are subject to vesting based on employment through December 31, 2011

Remarks:

By: Dennis Meany, attorney in 02/12/2010 <u>fact</u>

** 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.