FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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 Section 30(h) of the Investment Company Act of 1940

							` '	,											
1. Name and Address of Reporting Person* FORD BETH					2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS &									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>FURD</u>	<u>BETH</u>								S INC [≃			Direct	or		10% Ov	vner
-					-	1/10	1011	1CL	<u> </u>	11 1	J			X	Office below	r (give title		Other (s	specify
(Last) (First) (Middle) 521 WEST 57TH STREET					3. Date of Earliest Transaction (Month/Day/Year)										EVP, Sur	ooly (,		
				11/	11/30/2010										, , 1	rJ			
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)									· ·		`	, ,		Line)		·			
NEW YO	ORK N	Y	10019											X		•		orting Perso	
-					-										Form Perso		e thar	n One Repo	rting
(City)	(S	tate)	(Zip)												. 0.00				
		Tab	le I - Nor	n-Deriv	ative	Sec	curiti	es A	cquired,	Disi	oosed	of. or Be	enefic	ially	Owne	d			
1 Title of (Conview (Inc		101	2. Trans		_	A. Dee		3.			rities Acqui					6.04	wnershin .	7. Nature
Date			Date			Execution Date,		e, Transaction Dis			ed Of (D) (In	str. 3, 4	and	r 5. Amount of Securities Beneficially		6. Ownership Form: Direct		of Indirect	
(Mc					Day/Ye		if any (Month/Day/Year		ar) Code (Instr. 5)					Owned		Following (I)		(Instr. 4)	Beneficial Ownership
					Code V				Amount	(A) (D)	or Pri	•••	Reported Transaction(s)			- 1	(Instr. 4)		
								Code	<u> </u>	Amount	(D)	FII	Ce	(Instr. 3	and 4)				
		Т	able II - I	Deriva	tive S	Secu	rities	Aco	uired, D	ispo	sed of	, or Ben	eficia	lly O	wned				
			(e.g., p	uts,	calls	, war	rants	s, option	s, c	onverti	ible sec	urities	s)					
1. Title of	2.	3. Transaction	3A. Deeme		4.		5. Numbe			6. Date Exercisable and		7. Title and			Price of	9. Number		10.	11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any		Transaction Code (Inst				Expiration Date (Month/Day/Year)			Amount o			erivative ecurity	derivative Securities		Ownership Form:	of Indirect Beneficial
(Instr. 3) Price of (Month/Day/Year)				8)		Securities Acquired		Underlying Derivative Secur					(Instr. 5)		Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)	
Security						(A) o				(Instr. 3 and 4)				"		Following Reported Transaction(s)		(I) (Instr. 4)	(11150.4)
						Disposed of (D)													
								(Instr. 3, 4 and 5)								(Instr. 4)			
									Amo		nt								
													or Numb						
						l.,	 		Date		piration		of						
					Code	٧	(A)	(D)	Exercisable	; Da	ate	Title	Share	S			-		
Stock Equivalent Unit	(1)	11/30/2010	12/01/2	010	Α		74		(2)		(2)	Common Stock	74	;	\$52.52	4,790		D	

Explanation of Responses:

- 1. The Stock Units ("Units") convert to Common Stock on a one-for-one basis.
- 2. 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. 15 of the acquired Units are subject to vesting based on employment through December 31, 2011.

By: Dennis Meany, attorney in

fact

** Signature of Reporting Person

Date

12/01/2010

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.