## 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

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

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*  Anderson Robert G.					IN	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [ IFF ]									ck all appl Direct	icable)	g Pers	erson(s) to Issuer  10% Owner Other (specify	
(Last) 521 WES	(FI ST 57TH ST	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2018										below) below)  Controller			
(Street) NEW YO		tate) (	10019 (Zip)		-	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line) X	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Tran				2. Transa	action	ction 2A. Deemed Execution Date ay/Year) if any		Deemed ecution Date,		3. Transaction Code (Instr.		posed of, or Benefic 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		or 4 and 5)	5. Amo Securit Benefic Owned Reporte	unt of les ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock			03/15	/2018	2018				V	Amount 652 <sup>(1)</sup>	(D)		0.0000	Transaction(s) (Instr. 3 and 4)  10 12,519			D		
Common	Stock	03/15/2018						F		222(2	2) D	\$1	139.03	03 12,297		D			
		T	able II -									, or Bei ible sec			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	n Date, Trans		5. Nun of Instr. Deriva Securi Acquii (A) or Dispo of (D) (Instr. and 5)		vative irities ired r osed )	6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		S (I	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y D (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	nber					
Stock Equivalent Unit	(3)	03/15/2018	03/16/	2018	A		6		(4)		(4)	Common Stock	6		\$139.03	3,797	T	D	

## **Explanation of Responses:**

- 1. These shares represent the 50% portion of the reporting person's payout under the 2015-2017 Long Term Incentive Plan ("LTIP") cycle settled in shares of the issuer's common stock. The number of shares was determined based on the average closing market price of the issuer's common stock for the twenty trading days prior to January 2, 2015, the first stock trading day of the LTIP cycle.
- 2. Shares withheld to satisfy tax withholding obligations in connection with the receipt of shares under the LTIP.
- 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. 1 of the acquired Units is subject to vesting based on employment through December 31, 2019

03/19/2018 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.