SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

l	OMB Number:	3235-0287
	Estimated average bur	den
l	hours per response:	0.5

1. Name and Address of Reporting Person(*) 2. Issuer Name and Ticker Or Trading Symbol I INTERNATIONAL FLAVORS & FRAGRANCESINC [IFF] 5. Relationship of Reporting Person(*) to Issuer (Check all applicable) 1. Name and Address of Reporting Person(*) 4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Relationship of Reporting Person(*) to Issuer (Check all applicable) X Derivative Definition 5.1 WEST 57TH STREET 3. Date of Earliest Transaction (Month/Day/Year) 6. Individual or Joint/Group Fileg (Check Applicable Dotom) 0. Social Column (Internation Internation Internatinternatinternation Internation Internation Internation Internati	Section obligat	this box if no lo n 16. Form 4 or tions may contin tion 1(b).		STAT		ed purs	suant	to Section	16(a)	of the Se	ecuriti	es Exchang	je Act of 1		RSF	ΗP	Estima		r: erage burder sponse:	3235-0287 1 0.5	
Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) below)								INTERNATIONAL FLAVORS &								(Check all applicable)					
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xplanation of Responses

1. Upon the vesting of Restricted Stock Units ("RSUs") on May 6, 2021, the reporting person did not defer the receipt of 255 shares of Common Stock pursuant to IFF's deferred compensation plan.

2. The RSUs convert to Common Stock on a one-for-one basis.

3. Represent RSUs granted under the Non-Employee Director Compensation Program.

/s/ Nanci Prado, attorney in fact 05/07/2021

** 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.