FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|
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| hours per response: | 0.5 | | | | | | |

| 1. Name and Address of Reporting Person* MEANY DENNIS M | | | | | | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF] | | | | | | | | | ck all appl Direct Office | icable) or r (give title | ıg Per | rson(s) to Iss 10% Ov Other (s | vner | |
|---|--|--|---|---|---|--|--------|-------------|--|-----|-----------|--|-------------------------------|---|---|--------------------------------|--------------------------------------|--|--|--|
| (Last) (First) (Middle) 521 WEST 57TH STREET | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/23/2008 | | | | | | | | | below | , | nsel | below) & Secretar | у | | | |
| (Street) NEW YO | | tate) | 10019 Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Ye | | | | | | | | Line | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Non- | Deriva | ative | Sec | uritie | es Ao | cquired, | Dis | posed | of, or Be | enef | iciall | y Owne | d | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date | | | ar) Code (I | Transaction Dispose 5) | | | | , 4 and | 5. Amou Securiti Benefic Owned Reporte Transac | ies For (D) Following (I) (| | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | V | Amount | (A) or (D) | | Price | | 3 and 4) | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) | | urity | 3. Price of Derivative Security (Instr. 5) | | Ov Fo Dii or (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | | opiration | Title | Amo or Num of Sha | | | | | | | |
| Stock Equivalent | \$0 ⁽¹⁾ | 12/23/2008 | 12/24/200 | 08 | A | | 89 | | (2) | | (2) | Common Stock | 8 | 39 | \$27.88 | 19,697 | | 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. 18 of the acquired Units are subject to vesting based on employment through December 31, 2009.

<u>/s/ Dennis Meany</u> <u>12/24/2008</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.