FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF C	HANGES	IN BENI	EFICIAL	OWNER	SHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Fibig Andreas					IN	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF]									ationship o all applic Directo	cable)	g Pers	on(s) to Iss		
(Last) 521 WES	(Fi ST 57TH ST	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017									Officer below)		Other (specification)		specify	
(Street) NEW Y(10019 (Zip)		4. 11	, , , ,								. Indivine)	Form fi	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,		Transaction Dis			4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price			orted nsaction(s) tr. 3 and 4)			(Instr. 4)		
Common Stock 03/2			03/15	/2017	2017			A		7,868(1) A	\$0.00	000	36,664			D			
Common Stock 03/15/			/2017	2017		F		3,816 ⁽²⁾ D \$		\$128	3.1	32,	32,848		D					
	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. Conversior or Exercise Price of Derivative Security			3A. Deem Executior if any (Month/Da	Date, Transa Code (tion of		6. Date Exercisal Expiration Date (Month/Day/Year		e Amount of		f s g Security	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amoun or Numbe of Shares	r						
Stock Equivalent Unit	(3)	03/15/2017	03/16/	2017	A		11,115		(4)		(4)	Common Stock	11,11	5	\$128.1	20,255	5	D		

Explanation of Responses:

- 1. These shares represent the 50% portion of the reporting person's payout under the 2014-2016 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, 2014, the first stock trading day of the LTIP cycle.
- 2. Shares withheld to satisfy tax withhelding 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. 2,223 of the acquired Units are subject to vesting based on employment through December 31, 2018.

Nanci Prado, attorney in fact 03/16/2017

** Signature of Reporting Person

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.