### STATE FARM MUTUAL AUTOMOBILE INSURANCE CO

Form SC 13G/A February 03, 2004

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934

(Amendment No. \_\_\_\_) \*

14

	AIR PRODUCTS & CHEMICALS, INC.
	(Name of Issuer)
	COMMON SHARES
	(Title of Class of Securities)
	009158106
	(Cusip Number) 12/31/2003
(D	ate of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)
[ ] Rule 13d-1(c)
[ ] Rule 13d-1(d)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities

Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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CUSIP No(	009158106					
	Reporting Person and I.R.S. Identification Mutual Automobile Insurance Company			0		
2. Check the (a) (b)X		oup				
3. SEC USE (	DNLY:	_				
4. Citizensh	nip or Place of Organization: Illinois	5				
Number of Shares	5. Sole Voting Power: 7,018,600				_	
Beneficially Owned by	6. Shared Voting Power: 0				_	
Each Reporting	7. Sole Dispositive Power: 7,018,600	)			_	
Person With	8. Shared Dispositive Power: 58,930					
9. Aggregate	e Amount Beneficially Owned by each Re	eporti -	ng Pe	rson	: 7,0	77,530
10. Check Box	$\kappa$ if the Aggregate Amount in Row 9 exc	cludes	Cert	ain	Share	es:
11. Percent o	of Class Represented by Amount in Row	9: 3.	11 %			
12. Type of H	Reporting Person: IC	_				
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CUSIP No(						
	Reporting Person and I.R.S. Identification Life Insurance Company 37-0533090	- ation	No.:			
2. Check the (a)X	e appropriate box if a Member of a Gro - -	oup				
3. SEC USE (	DNLY:	_				
4. Citizensh	nip or Place of Organization: Illinois	3				
Number of Shares	5. Sole Voting Power: 217,500				_	
Beneficially Owned by	6. Shared Voting Power: 0				-	
Each Reporting	7. Sole Dispositive Power: 217,500				_	
Person With	8. Shared Dispositive Power: 2,968					

9. Aggregate Amount Beneficially Owned by each Reporting Person: 220,468

10. Check Bo	x if the Aggregate Amount in Row 9 ex	cludes Certain Shares:
11. Percent	of Class Represented by Amount in Row	9: 0.10 %
12. Type of	Reporting Person: IC	_
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CUSIP No	009158106	
	Reporting Person and I.R.S. Identificarm Fire and Casualty Company 37-05330	
2. Check the (a) (b)X_	<del></del>	oup
3. SEC USE	ONLY:	_
4. Citizens	hip or Place of Organization: Illinoi:	<del>-</del> S
Number of Shares	5. Sole Voting Power: 1,701,200	
	6. Shared Voting Power: 0	
Each Reporting	7. Sole Dispositive Power: 1,701,200	0
Person With	8. Shared Dispositive Power: 7,435	
9. Aggregat	e Amount Beneficially Owned by each Re	eporting Person: 1,708,635
10. Check Box	x if the Aggregate Amount in Row 9 ex	- cludes Certain Shares:
11. Percent	of Class Represented by Amount in Row	9: 0.75 %
12. Type of	Reporting Person: IC	_
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CUSIP No	009158106	
	Reporting Person and I.R.S. Identification of the Reporting Person and I.R.S. Identification of the Report Person Indiana and I.R.S. Identific	- ation No.:
2. Check the (a) (b)X	e appropriate box if a Member of a Gro - -	oup
3. SEC USE	ONLY:	_
4. Citizens	hip or Place of Organization: Delaware	<del>-</del> e
Number of Shares	5. Sole Voting Power: 1,060,000	_
Beneficially Owned by	6. Shared Voting Power: 8,387	
Each Reporting	7. Sole Dispositive Power: 1,060,000	0
Person With	8. Shared Dispositive Power: 8,387	<del></del>

9.	Aggregate Amount Beneficially Owned by each Ro	eporting Person: 1,068,387
10.	Check Box if the Aggregate Amount in Row 9 ex	- cludes Certain Shares:
11.	Percent of Class Represented by Amount in Row	9: 0.47 %
12.	Type of Reporting Person: IA	=
Sch	nedule 13G	Page of Pages 12
CUSI	IP No009158106	
1.	Name of Reporting Person and I.R.S. Identification State Farm Insurance Companies Employee Retire	
2.	Check the appropriate box if a Member of a Grant (a) (b)X	oup
3.	SEC USE ONLY:	_
4.	Citizenship or Place of Organization: Illinoi	S
	mber of 5. Sole Voting Power: 4,000,000 ares	
	neficially 6. Shared Voting Power: 0	
Eac	7. Sole Dispositive Power: 4,000,00	0
_	porting	
9.	Aggregate Amount Beneficially Owned by each Re	eporting Person: 4,006,111
10.	Check Box if the Aggregate Amount in Row 9 ex	- cludes Certain Shares:
11.	Percent of Class Represented by Amount in Row	9: 1.76 %
12.	Type of Reporting Person: EP	_
Sch	nedule 13G	Page of Pages 12
CUSI	IP No009158106	
1.	Name of Reporting Person and I.R.S. Identifications State Farm Insurance Companies Savings and The Employees 37-6091823	
2.	Check the appropriate box if a Member of a Green (a) (b)X	– oup
3.	SEC USE ONLY:	_
4.	Citizenship or Place of Organization: Illinoi	5
	mber of 5. Sole Voting Power: 1,376,800	-
Ber	neficially 6. Shared Voting Power: 0	

Each Reporting Person With		7. Sole Dispositive Power: 1,376,800	
		8. Shared Dispositive Power: 0	
9. Agg	gregate	te Amount Beneficially Owned by each Reporting	ng Person: 1,376,800
10. Che	eck Box	ox if the Aggregate Amount in Row 9 excludes	Certain Shares:
11. Per	cent o	of Class Represented by Amount in Row 9: 0.	50 %
12. Typ	pe of I	Reporting Person: EP	
Schedul	le 13G	G Page _	8 of Pages
CUSIP No	·(		
		Reporting Person and I.R.S. Identification larm Mutual Fund Trust	No.:
(a)	eck the		
3. SEC	C USE (	ONLY:	
4. Cit	izensl	ship or Place of Organization:	
Number Shares	of	5. Sole Voting Power: 42,300	
Benefic Owned b	_	6. Shared Voting Power: 0	
Each Reporti	-	7. Sole Dispositive Power: 42,300	
-	_	8. Shared Dispositive Power: 0	
9. Agg	gregate	te Amount Beneficially Owned by each Reportin	ng Person: 42,300
10. Che	eck Box	ox if the Aggregate Amount in Row 9 excludes	Certain Shares:
11. Per	cent o	of Class Represented by Amount in Row 9: 0.0	)1 %
12. Typ	pe of I	Reporting Person: IV	
Schedul	le 13G	G Page _	9 of Pages
Item 1(a	a) and	d (b). Name and Address of Issuer & Principa	al Executive Offices:
		AIR PRODUCTS & CHEMICALS, INC. 7201 HAMILTON BOULEVARD ALLENTOWN, PA 18195-1501	
Item 2(a	a). Na	Name of Person Filing: State Farm Mutual Auto	omobile Insurance
	_	Company and related en	ntities; See Item 8
Item 2(k	o). Ad	Address of Principal Business Office: One Sta	ate Farm Plaza

Bloomington, IL 61710

Item 2(c). Citizenship: United States Item 2(d) and (e). Title of Class of Securities and Cusip Number: See above. Item 3. This Schedule is being filed, in accordance with 240.13d-1(b). See Exhibit A attached. Item 4(a). Amount Beneficially Owned: 15,500,231 shares Item 4(b). Percent of Class: 6.82 percent pursuant to Rule 13d-3(d)(1). Item 4(c). Number of shares as to which such person has: (i) Sole Power to vote or to direct the vote: 15,416,400 (ii) Shared power to vote or to direct the vote: 8,387 (iii) Sole Power to dispose or to direct disposition of: 15,416,400 (iv) Shared Power to dispose or to direct disposition of: 83,831 Item 5. Ownership of Five Percent or less of a Class: Not Applicable. Item 6. Ownership of More than Five Percent on Behalf of Another Person: N/A Item 7. Identification and Classification of the Subsidiary Which Acquired the Security being Reported on by the Parent Holding Company: N/A Item 8. Identification and Classification of Members of the Group: See Exhibit A attached. Item 9. Notice of Dissolution of Group: N/A Schedule 13G 

Item 10. Certification. By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

01/21/2004	STATE FARM MUTUAL AUTOMOBILE
Date	INSURANCE COMPANY
	STATE FARM LIFE INSURANCE COMPANY
	STATE FARM FIRE AND CASUALTY COMPANY
STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST	STATE FARM INVESTMENT MANAGEMENT CORP.
STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES	STATE FARM ASSOCIATES' FUNDS TRUST - STATE FARM GROWTH FUND
	STATE FARM ASSOCIATES' FUNDS TRUST - STATE FARM BALANCED FUND
	STATE FARM MUTUAL FUND TRUST
	STATE FARM VARIABLE PRODUCT TRUST
/s/ Paul N. Eckley	/s/ Paul N. Eckley
Paul N. Eckley, Fiduciary of each of the above	Paul N. Eckley, Sr. Vice President of each of the above
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#### EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, State Farm Life and Accident Assurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment adviser under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State Farm Associates' Funds Trust, State Farm Variable Product Trust and State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an

Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

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Name	Classific Under It		Number Shares h on Proce of Sai	pased eeds
State Farm Mutual Automobile Insurance Compan	ıy IC	7	7,077,530	shares
State Farm Life Insurance Company	IC		220,468	shares
State Farm Life and Accident Assurance Compan	y IC		0	shares
State Farm Fire and Casualty Company	IC	1	,708,635	shares
State Farm Investment Management Corp.	IA		0	shares
State Farm Associates' Funds Trust - State				
Farm Growth Fund	IV		830,000	shares
State Farm Associates' Funds Trust - State				
Farm Balanced Fund	IV		230,000	shares
State Farm Variable Product Trust	IV		8,387	shares
State Farm Insurance Companies Employee				
Retirement Trust	EP	4	1,006,111	shares
State Farm Insurance Companies Savings and				
Thrift Plan for U.S. Employees	EP			
Equities Account		1	,120,800	shares
Balanced Account			256,000	shares
State Farm Mutual Fund Trust	IV		42,300	shares
		 1.5	5,500,231	shares
			, ,	