AIR PRODUCTS & CHEMICALS INC /DE/

Form SC 13G February 08, 2018

Schedule 13G

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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. ____) *

28

	AIR PRODUCTS & CHEMICALS, INC.
•	(Name of Issuer)
	COMMON SHARES
•	(Title of Class of Securities)
	009158106
•	(Cusip Number) 12/31/2017
(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). Page ____ of ___ Pages ____ 12 Schedule 13G CUSIP No. ____009158106 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100 2. Check the appropriate box if a Member of a Group (a) ____ (b) ___X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 7,018,600 Shares Beneficially 6. Shared Voting Power: 56,922 7. Sole Dispositive Power: 7,018,600 Each Reporting Person With 8. Shared Dispositive Power: 56,922 9. Aggregate Amount Beneficially Owned by each Reporting Person: 7,075,522 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____ 11. Percent of Class Represented by Amount in Row 9: 3.23 % 12. Type of Reporting Person: IC Schedule 13G Page ____ of ___ Pages ____ 12 CUSIP No. ____009158106 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090 2. Check the appropriate box if a Member of a Group (a) _____ (b) __X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 236,500 Beneficially 6. Shared Voting Power: 12,754 Owned by 7. Sole Dispositive Power: 236,500 Each Reporting Person With 8. Shared Dispositive Power: 12,754 9. Aggregate Amount Beneficially Owned by each Reporting Person: 249,254

10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____

11. Percent	of Class Represented by Amount in R	ow 9: 0.11 %
12. Type of	Reporting Person: IC	
Schedule 13G		Page of Pages
CUSIP No	009158106	
	Reporting Person and I.R.S. Identif rm Fire and Casualty Company 37-053	
2. Check the (a) (b)X_	—	Group
3. SEC USE	ONLY:	
4. Citizens	hip or Place of Organization: Illin	ois
Number of Shares	5. Sole Voting Power: 1,701,200	
	6. Shared Voting Power: 7,477	
Each	7. Sole Dispositive Power: 1,701,	200
Reporting Person With	8. Shared Dispositive Power: 7,47	7
9. Aggregate	e Amount Beneficially Owned by each	Reporting Person: 1,708,677
10. Check Box	x if the Aggregate Amount in Row 9	excludes Certain Shares:
11. Percent	of Class Represented by Amount in Re	ow 9: 0.78 %
12. Type of	Reporting Person: IC	
Schedule 13G		Page of Pages
CUSIP No	009158106	
	Reporting Person and I.R.S. Identif rm Investment Management Corp.	ication No.:
2. Check the (a)X	e appropriate box if a Member of a - - -	Group
3. SEC USE	YLNC:	
4. Citizens	hip or Place of Organization: Delaw	are
Number of Shares	5. Sole Voting Power: 1,060,000	<u> </u>
Beneficially Owned by	6. Shared Voting Power: 6,742	
Each Reporting	7. Sole Dispositive Power: 1,060,	000
Person With	8. Shared Dispositive Power: 6,74	2

^{9.} Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,742

10. Check Box	x if the Aggregate Amount in Row 9 exc	- cludes Certain Shares:
11. Percent o	of Class Represented by Amount in Row	9: 0.49 %
12. Type of H	Reporting Person: IA	-
Schedule 13G		Page of Pages
CUSIP No	009158106	
	Reporting Person and I.R.S. Identification of the Reporting Person and I.R.S. Identification of the Report of the	
2. Check the (a) (b)X		– pup
3. SEC USE (DNLY:	=
4. Citizensh	nip or Place of Organization: Illinois	- 3
Number of Shares	5. Sole Voting Power: 4,000,000	-
Beneficially Owned by	6. Shared Voting Power: 8,362	
Each Reporting	7. Sole Dispositive Power: 4,000,000)
Person With	8. Shared Dispositive Power: 8,362	
9. Aggregate	e Amount Beneficially Owned by each Re	eporting Person: 4,008,362
10. Check Box	x if the Aggregate Amount in Row 9 exc	- cludes Certain Shares:
11. Percent o	of Class Represented by Amount in Row	- 9: 1.83 %
12. Type of H	Reporting Person: EP	=
Schedule 13G		Page of Pages
CUSIP No	009158106	
State Fai	Reporting Person and I.R.S. Identification Insurance Companies Savings and Theoryees 37-6091823	
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: 1,376,800	_
Beneficially Owned by	6. Shared Voting Power: 0	
Each	7. Sole Dispositive Power: 1,376,800	

_	portingeson With 8. Shared Dispositive Power: 0
9.	Aggregate Amount Beneficially Owned by each Reporting Person: 1,376,800
10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
11.	Percent of Class Represented by Amount in Row 9: 0.63 %
12.	Type of Reporting Person: EP
Scł	Page of Pages 8 12
CUS	IP No009158106
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Fund Trust 37-1400576
2.	Check the appropriate box if a Member of a Group (a) (b)X
3.	SEC USE ONLY:
4.	Citizenship or Place of Organization: Illinois
Sha Ber	nber of 5. Sole Voting Power: 0 ares neficially 6. Shared Voting Power: 14,532
Eac	1
_	cson With 8. Shared Dispositive Power: 14,532
9.	Aggregate Amount Beneficially Owned by each Reporting Person: 14,532
10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
11.	Percent of Class Represented by Amount in Row 9: 0.01 %
	Type of Reporting Person: EP nedule 13G Page of Pages 9 12
Iter	n 1(a) and (b). Name and Address of Issuer & Principal Executive Offices:
	AIR PRODUCTS & CHEMICALS, INC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195-1501
Iter	n 2(a). Name of Person Filing: State Farm Mutual Automobile Insurance
	Company and related entities; See Item 8 and Exhibit A
Iter	n 2(b). Address of Principal Business Office: One State Farm Plaza
	Bloomington, IL 61710

Item	2(c)	•	Citize	nsh:	ip: (Jnit	ed	Sta	ates	5												
Item	2 (d)	an	ıd (e).	Т:	itle	of	Cla	ass	of	Sec	cur	iti	es a	and	Cu	sip	Nu	ımbe	er:	See	ab	ove.
Item	3.	Thi	s Sche	dule	e is	bei	ng	fil	Led,	ir	n a	cco	rda	nce	wi	th	240	0.13	3d-1	1 (b)		
		See	Exhib	it A	A att	ach	ed.														-	
Item	4(a)	•	Amount	Ber	nefic	cial	ly	Own	ned:	: 15	5,49	99,	889	sh	are	s						
Item	4 (b)		Percen	t oi	f Clá	ass:	7.	.08	per	cer	nt p	pur	suai	nt i	to 1	Rul	.e 1	L3d-	-3 (d) (1	.) .	
Item	4(c)		Number	of	shaı	res	as	to	whi	ch	su	ch :	per	son	ha	s:						
		(i) Solo ii) Sh iii) So iv) Sh	areo	d pov Powe	wer er t	to o c	vot disp	ce c	or t	to o	dir o d	ect ire	the ct (e vo disp	ote pos	e: 1 siti	106 , Lon	,789 of	:15,		•
Item	5.	Own	ership	of	Five	e Pe	rce	ent	or	les	ss (of	a C	las	s: 1 _	Not	. Ap	pli	ical	ble.		
Item	6.	Own	ership	of	More	e th	.an	Fiv	7e F	Perc	cent	t o	n Be	eha.	lf (of	Anc	othe	er l	Pers	on:	N/A
Item	7.	Ide	entific	atio	on ar	nd C	las	ssif	fica	atio	on (of	the	Sul	bsi	dia	ıry	Whi	ich	Acq	[uir	ed
		the	Secur	ity	beir	ng R	epo	orte	ed c	on k	oy t	the	Pa	ren	t H	old	ling	g Co	ompa	any:	N/	A
Item	8.	Ide	entific	atio	on ar	nd C	las	ssif	fica	atio	on (of !	Meml	ber	s 0:	ft	he	Gro	oup	:		
		See	Exhib	it A	A att	ach	ed.	•														
Item	9.	Not	ice of	Dis	ssolı	utio	n c	of G	Grou	ıp:	N,	/A										
Sche	edule	13	G							_				P	age		10	_ 01		12	. Pa	ges
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influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such 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.

02/08/2018 STATE FARM MUTUAL AUTOMOBILE

INSURANCE COMPANY Date

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 STATE FARM ASSOCIATES FUNDS
SAVINGS AND THRIFT PLAN FOR TRUST - STATE FARM GROWTH SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES

TRUST - STATE FARM GROWTH FUND

STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND

STATE FARM MUTUAL FUND TRUST

/s/ Paul N. Eckley

/s/ Paul N. Eckley

Paul N. Eckley, Fiduciary of each of the above Schedule 13G

Paul N. Eckley, Vice President of each of the above Page ____ of ___ Pages

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, 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 advisor 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".

Schedule 13G		of	_ Pages
	12	12	
		Number	of
		Shares k	
	Classification	on Proce	eeds
Name	Under Item 3	of Sal	le
State Farm Mutual Automobile Insurance Compar	ny IC	7,075,522	shares
State Farm Life Insurance Company	IC	249,254	shares
State Farm Fire and Casualty Company	IC	1,708,677	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	6,742	shares
State Farm International Life Insurance			
Company Ltd.	IV	0	shares
State Farm Insurance Companies Employee			
Retirement Trust	EP	4,008,362	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	14,532	shares
		15 400 000	,
		15,499,889	snares