FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| OMB APPROVAL | | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|
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| 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* PAULL MATTHEW H | | | | | | 2. Issuer Name and Ticker or Trading Symbol AIR PRODUCTS & CHEMICALS INC DE/ [APD] | | | | | | | | | | all applica Director Officer (| able) | g Pers | on(s) to Issi 10% Ov Other (s | vner | |
|---|--|------------|--|-----|---------------------------|---|--------------|-----|-------------|--|----------|--|--|--------------------------------------|------------------------------|---|--|---|--|--|--|
| (Last) (First) (Middle) 7201 HAMILTON BOULEVARD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/23/2014 | | | | | | | | | | below) | | | below) | | |
| (Street) ALLENTOWN PA 18195 | | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ndiv e) <mark>X</mark> | ′ | | | | | |
| (City) | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | n/Day/Y | Execution Date, | | | ear) | | v | 4. Securitie Disposed (5) Amount | (A) or | Price | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution D if any (Month/Day) | l A | 4. Transa Code (18) | ction | 5. Number of | | 6. D Exp | ts, options, c 6. Date Exercisable Expiration Date (Month/Day/Year) | | | 7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an | d f Security | D S (I | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exe | e ercisable | Ex Da | piration te | Title | Amoun or Numbe of Shares | | | | | | | |
| Phantom Stock ⁽¹⁾ | \$0.0000(2) | 01/23/2014 | | | A | | 1,081 | | 08/0 | 08/1988 ⁽³⁾ | 08 | /08/1988 ⁽³⁾ | Common Stock | 1,081 | | \$111.01 | 1,539.85 | 543 | D | | |

Explanation of Responses:

- 1. Phantom deferred stock units (Units) acquired under the Air Products Stock Account of the issuer's Deferred Compensation Program for Directors, of the Company's Long-Term Incentive Plan (the Plan).
- 2. Not applicable to this security
- 3. These units are payable in the form of shares of common Stock equal in number to the units, at the time elected by the reporting person, which is generally after service on the issuer's Board of Directors ends. Units may be paid in a lump sum or up to ten installments as elected by the reporting person in advance.

<u>Linda M. Svoboda as Attorney</u> in Fact <u>01/24/2014</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.