FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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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* NOSKI CHARLES H 2. Date of Event Requiring Statement (Month/Day/Year) 05/19/2005				ent	3. Issuer Name and Ticker or Trading Symbol AIR PRODUCTS & CHEMICALS INC /DE/ [APD]						
(Last) (First) (Middle) 7201 HAMILTON BOULEVARD			03/13/2003		(Check all appli	lationship of Reporting Pers ck all applicable) Director Officer (give title	10% Owne	r	5. If Amendment, Date of Original Filed (Month/Day/Year) 05/23/2005		
(Street) ALLENTOV (City)	VN PA (State)	18195 (Zip)			below)		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
		Т	able I - Non	-Derivati	ive Securiti	es Beneficiall	y Owned				
1. Title of Security (Instr. 4)					. Amount of Se eneficially Ow		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
								.,			
Common Sto	ock				40	0			By Trust		
Common Sto	ock	(e.ç			Securities	Beneficially ((Instr. 5) I Owned	E	By Trust		
	vative Security (I			s, warrai	e Securities nts, options	Beneficially (Owned securities	E	5. ion Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

Remarks:

By: Linda M. Svoboda as Attorney in Fact

05/23/2005

** 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 5 (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.