FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
IIISII UCIIOII 1(D).	riled pursuant to Section 10(a) of the Securities Exchange Act of 1934

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1	93
or Section 30(h) of the Investment Company Act of 1940	

Name and Address of Reporting Person*     Cogut Charles I				2. Issuer Name and Ticker or Trading Symbol Air Products & Chemicals, Inc. [ APD ]							(Che	elationship o eck all applic Director	able)	g Pers	on(s) to Issu 10% Ow				
(Last)	,	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023						Officer below)	(give title		Other (s below)	pecify			
1940 AIR PRODUCTS BLVD.				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) ALLENTOWN PA 18106-5500													)	X Form filed by One Reporting Person Form filed by More than One Reporting					
	10 111 1		10100 550		$\perp$									Person	Person				
(City)	(5	State)	(Zip)		Ru	ıle	10b5-:	1(c)	) Trans	acti	on Inc	dicatio	n						
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									to										
		Tal	ole I - Nor	n-Deriv	ative	Se	curities	s Ac	quired,	Disp	osed (	of, or E	Bene	ficially	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (I	Transaction Dispose Code (Instr. 5)		rities Acquired (A) c ed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amoun	t (A) or Pi		Price	Transacti (Instr. 3 a	ion(s)			Instr. 4)
			Table II - I						uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Yo	ate, Tr	ransact ode (In		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e S Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)
				c	ode	v	(A)	(D)	Date Exercisab		xpiration ate	Title	or Nu	nount ımber Shares		(Instr. 4)	(5)		
Phantom Stock <sup>(1)</sup>	\$0.0000 <sup>(2)</sup>	06/30/2023			A		43.0594		(3)		(3)	Commo Stock	n 43	3.0594	\$294.75	7,295.49	994	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, under the Company's Long-Term Incentive 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 Company'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.

Andrea I. Rennig as Attorney in 07/05/2023 Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.