Number of Shares

Beneficially 6. Shared Voting Power: 49,705

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

## SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No. \_\_\_\_)\*

ATD DDODUCTS & CHEMICALS, INC.
AIR PRODUCTS & CHEMICALS, INC.
(Name of Issuer)
COMMON CHAREC
COMMON SHARES
(Title of Class of Securities)
009158106
(Cusip Number) 12/31/2015
(Date 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).
Schedule 13G Page of Pages 2 12
CUSIP No009158106
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

	ed by h 7. Sole Dispositive Power: 7,018,6 orting son With 8. Shared Dispositive Power: 49,76		
9.	Aggregate Amount Beneficially Owned by each	Reporting Person: 7,	068,305
10.	Check Box if the Aggregate Amount in Row 9 e	xcludes Certain Shar	res:
11.	Percent of Class Represented by Amount in Ro	w 9: 3.28 %	
12.	Type of Reporting Person: IC		
Sch	edule 13G	Page of	Pages
CUSI	P No009158106		
1.	Name of Reporting Person and I.R.S. Identifi State Farm Life Insurance Company 37-0533096		
2.	Check the appropriate box if a Member of a G (a) (b)X	roup	
3.	SEC USE ONLY:		
4.	Citizenship or Place of Organization: Illino	is	
	ber of 5. Sole Voting Power: 236,500	_	
Ben	res eficially 6. Shared Voting Power: 11,121		
Eac	· '		
	orting son With 8. Shared Dispositive Power: 11,12	1	
9.	Aggregate Amount Beneficially Owned by each	 Reporting Person: 24	17,621
10.	Check Box if the Aggregate Amount in Row 9 e	 xcludes Certain Shar	
			es
11.	Percent of Class Represented by Amount in Ro		es
	Percent of Class Represented by Amount in Ro		es
12.	· · · · · · · · · · · · · · · · · · ·	w 9: 0.11 % — Page of	
12. Sch	Type of Reporting Person: IC	w 9: 0.11 % —	
12. Sch	Type of Reporting Person: IC edule 13G	w 9: 0.11 %  Page of  12  cation No.:	
12. Sch CUSI	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifi	w 9: 0.11 %  Page of  12  cation No.:	
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12. Sch CUSI 1. 2.  3. 4. Num	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifith State Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a Garage (a) (b)X  SEC USE ONLY:  Citizenship or Place of Organization: Illinooper of 5. Sole Voting Power: 1,701,200	w 9: 0.11 %  Page of  12  cation No.: 080	
12. Sch CUSI 1. 2. Num Sha Ben	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifith State Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a Geometry (a) (b)X  SEC USE ONLY:  Citizenship or Place of Organization: Illino (ber of 5. Sole Voting Power: 1,701,200) res eficially 6. Shared Voting Power: 6,455	w 9: 0.11 %  Page of  12  cation No.: 080	
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12. Sch CUSI 1. 2. Num Sha Ben Own Eac Rep	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifith State Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a General (a) (b)X  SEC USE ONLY:  Citizenship or Place of Organization: Illinother of 5. Sole Voting Power: 1,701,200 reseseficially 6. Shared Voting Power: 6,455 ed by h 7. Sole Dispositive Power: 1,701,200 reting	Page of 12  Cation No.: 080  Troup  is	Pages
12. Sch CUSI 1. 2. Num Sha Ben Own Eac Rep Per	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifith State Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a General (a) (b)X  SEC USE ONLY:  Citizenship or Place of Organization: Illinother of 5. Sole Voting Power: 1,701,200 reseseficially 6. Shared Voting Power: 6,455 ed by h	Page of cation No.: 080 roup is Reporting Person: 1,	Pages
12. Sch CUSI 1. 2. Num Sha Ben Own Eac Rep Per 9.	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identifith State Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a General (a) (b)X  SEC USE ONLY:  Citizenship or Place of Organization: Illinother of 5. Sole Voting Power: 1,701,200 reseseficially 6. Shared Voting Power: 6,455 ed by h 7. Sole Dispositive Power: 1,701,200 reting son With 8. Shared Dispositive Power: 6,455  Aggregate Amount Beneficially Owned by each	Page of cation No.: 080 roup is Reporting Person: 1, xcludes Certain Shar	Pages
12. Sch CUSI 1. 2. Num Sha Ben Own Eac Rep Per 9. 10.	Type of Reporting Person: IC  edule 13G  P No009158106  Name of Reporting Person and I.R.S. Identificate Farm Fire and Casualty Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check the appropriate box if a Member of a General Company 37-0533  Check USE ONLY:  Citizenship or Place of Organization: Illino Company 49-05  Sole Voting Power: 1,701,200  reserved by a Sole Dispositive Power: 6,455  ed by a Sole Dispositive Power: 1,701,200  orting son With 8. Shared Dispositive Power: 6,455  Aggregate Amount Beneficially Owned by each  Check Box if the Aggregate Amount in Row 9 each	Page of cation No.: 080 roup is Reporting Person: 1, xcludes Certain Shar	Pages

CUSIP No. \_\_\_\_009158106

2. Type of Reporting Person: IA  Schedule 136  Page of Pages  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918  Owned by Each		
(a)x    3. SEC USE ONLY:  4. Citizenship or Place of Organization: Delaware  Number of 5. Sole Voting Power: 1,060,000  Shares    For Sole Dispositive Power: 1,060,000    Reporting    7. Sole Dispositive Power: 1,060,000    Reporting    8. Shared Dispositive Power: 6,397    9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397    9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:    1. Percent of Class Represented by Amount in Row 9: 0.49 %    2. Type of Reporting Person: IA    Schedule 13G    Schedule 13G    Page of Pages    1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6942145    2. Check the appropriate box if a Member of a Group (a) (a) (b)    (b)    3. SEC USE ONLY:    4. Citizenship or Place of Organization: Illinois    Number of 5. Sole Voting Power: 4,000,000    Shares    Beneficially 6. Shared Voting Power: 6,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	1.	
(a)x    3. SEC USE ONLY:  4. Citizenship or Place of Organization: Delaware  Number of 5. Sole Voting Power: 1,060,000  Shares    For Sole Dispositive Power: 1,060,000    Reporting    7. Sole Dispositive Power: 1,060,000    Reporting    8. Shared Dispositive Power: 6,397    9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397    9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:    1. Percent of Class Represented by Amount in Row 9: 0.49 %    2. Type of Reporting Person: IA    Schedule 13G    Schedule 13G    Page of Pages    1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6942145    2. Check the appropriate box if a Member of a Group (a) (a) (b)    (b)    3. SEC USE ONLY:    4. Citizenship or Place of Organization: Illinois    Number of 5. Sole Voting Power: 4,000,000    Shares    Beneficially 6. Shared Voting Power: 6,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918    9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	2.	Check the appropriate box if a Member of a Group
3. SEC USE ONLY: 4. Citizenship or Place of Organization: Delaware Number of 5. Sole Voting Power: 1,060,000 Shares Beneficially 6. Shared Voting Power: 6,397  7. Sole Dispositive Power: 6,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  1. Percent of Class Represented by Amount in Row 9: 0.49 %  2. Type of Reporting Person: IA  Schedule 13G Page of of Page of 6 of 12 Pages  USIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  2. Check the appropriate box if a Member of a Group (a) (b) (c) (a) (b)  7. Sole Dispositive Power: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  1. Percent of Class Represented by Amount in Row 9: 1.86 %  2. Type of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800		(a)
Number of S. Sole Voting Power: 1,066,000 Shares Benerficially 6. Shared Voting Power: 6,397 Owned by Each Reporting Person With 8. Shared Dispositive Power: 1,066,000 Reporting Person With 8. Shared Dispositive Power: 6,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		(b)X
Number of Shares Shared Voting Power: 6,397  5. Sole Dispositive Power: 1,060,000  7. Sole Dispositive Power: 6,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	3.	SEC USE ONLY:
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Owned by Each Reporting Person with 8. Shared Dispositive Power: 1,868,800  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  9. Aggregate Amount Beneficially Owned by excludes Certain Shares:  1. Percent of Class Represented by Amount in Row 9: 8.49 %  2. Type of Reporting Person: IA  Schedule 136 Page 6 of 12 Pages  CUSIP No. 609158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  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: 4,000,000  Shares Beneficially 6. Shared Voting Power: 4,000,000  Reporting Person With 8. Shared Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  60. Check Box if the Aggregate Amount in Row 9: 1.86 %  21. Type of Reporting Person: EP  Schedule 13G Page 7 of 12 Pages  CUSIP No. 609158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  22. Check the appropriate box if a Member of a Group (a) (b) X  33. SEC USE ONLY:  44. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,880	Sha	res
Page 7. Sole Dispositive Power: 1,060,000 Reporting Person With 8. Shared Dispositive Power: 6,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		
Person With 8. Shared Dispositive Power: 6,397  9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	Eac	h 7. Sole Dispositive Power: 1,060,000
1. Percent of Class Represented by Amount in Row 9 excludes Certain Shares:  1. Percent of Class Represented by Amount in Row 9: 0.49 %  2. Type of Reporting Person: IA  Schedule 136  Page of Pages  1. Name of Reporting Person and I.R.S. Identification No.:  State Farm Insurance Companies Employee Retirement Trust 36-6042145  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 4,000,000  Shares  Beneficially 6. Shared Voting Power: 6,918  Owned by  Each 7. Sole Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  12. Type of Reporting Person: EP  Schedule 136  Page of Pages  10. Name of Reporting Person and I.R.S. Identification No.:  State Farm Insurance Companies Savings and Thrift Plan for U.S.  Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (a) (a) (a)		
1. Percent of Class Represented by Amount in Row 9: 0.49 % 2. Type of Reporting Person: IA  Schedule 13G  Page of Pages 6	9.	Aggregate Amount Beneficially Owned by each Reporting Person: 1,066,397
2. Type of Reporting Person: IA  Schedule 13G  Page 6 of Pages  USIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 4,000,000  Shares Beneficially 6. Shared Voting Power: 6,918  Owned by  Page 7. Sole Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  22. Type of Reporting Person: EP  Schedule 13G  Page of Pages  10. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800  Shares  5. Sole Voting Power: 1,376,800	10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
Schedule 136  Page of Pages  OUSIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918  7. Sole Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  12. Type of Reporting Person: EP  Schedule 136  Page of Pages  OUSIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  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: 1,376,800  Shares	11.	Percent of Class Represented by Amount in Row 9: 0.49 %
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  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: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918 Owned by Each 7. Sole Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  1. Percent of Class Represented by Amount in Row 9: 1.86 %  2. Type of Reporting Person: EP Schedule 13G Page 7 of Pages  USIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a)	12.	Type of Reporting Person: IA
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145  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: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  12. Type of Reporting Person: EP  Schedule 13G Page of Pages  TUSIP No009158106  13. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (a) (a) (b)  3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800	Sch	edule 13G Page of Pages 12
State Farm Insurance Companies Employee Retirement Trust 36-6042145  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: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918 Owned by Each 7. Sole Dispositive Power: 4,000,000 Reporting Person With 8. Shared Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  12. Type of Reporting Person: EP  Schedule 13G Page of Pages  USIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800  Shares	CUSI	P No009158106
(a) (b) _X_  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 4,000,000 Shares Beneficially 6. Shared Voting Power: 6,918  Owned by Each 7. Sole Dispositive Power: 4,000,000 Reporting Person With 8. Shared Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  11. Percent of Class Represented by Amount in Row 9: 1.86 %  12. Type of Reporting Person: EP  Schedule 136 Page of Pages  TUSIP No009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (b)  3. SEC USE ONLY:  4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800  Shares	1.	
A. Citizenship or Place of Organization: Illinois  Number of Shares Beneficially 6. Shared Voting Power: 4,000,000  Reporting Person With 8. Shared Dispositive Power: 6,918  9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  9. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:  1. Percent of Class Represented by Amount in Row 9: 1.86 %  2. Type of Reporting Person: EP  Schedule 136 Page of Page 7 12  CUSIP No. 009158106  1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  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: 1,376,800	2.	(a)
Number of Shares Beneficially Owned by Each Farm Insurance Companies Suring Porting Porting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  2. Check the appropriate box if a Member of a Group (a) (b) _X	3.	SEC USE ONLY:
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9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,006,918  10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:		
1. Percent of Class Represented by Amount in Row 9: 1.86 %  2. Type of Reporting Person: EP  Schedule 13G  Page of Pages  7	9.	
2. Type of Reporting Person: EP  Schedule 13G  Page of Pages  7	10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
Schedule 13G  Page of Pages 7	11.	Percent of Class Represented by Amount in Row 9: 1.86 %
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  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: 1,376,800 Shares	12.	Type of Reporting Person: EP
<ol> <li>Name of Reporting Person and I.R.S. Identification No.:         State Farm Insurance Companies Savings and Thrift Plan for U.S.         Employees 37-6091823</li> <li>Check the appropriate box if a Member of a Group         (a)         (b)X</li> <li>SEC USE ONLY:     </li> <li>Citizenship or Place of Organization: Illinois     </li> <li>Number of 5. Sole Voting Power: 1,376,800         Shares</li> </ol>	Sch	edule 13G Page of Pages 7
State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823  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: 1,376,800 Shares	CUSI	P No009158106
(a)	1.	State Farm Insurance Companies Savings and Thrift Plan for U.S.
4. Citizenship or Place of Organization: Illinois  Number of 5. Sole Voting Power: 1,376,800 Shares	2.	(a)
Number of 5. Sole Voting Power: 1,376,800 Shares	3.	SEC USE ONLY:
Shares	4.	Citizenship or Place of Organization: Illinois

Eac Rep	ed by h orting son With	7. Sole Dispositive Power  8. Shared Dispositive Pow	
9.	Aggregate	e Amount Beneficially Owned	by each Reporting Person: 1,376,800
10.	Check Box	if the Aggregate Amount i	Row 9 excludes Certain Shares:
11.	Percent o	of Class Represented by Amo	unt in Row 9: 0.64 %
12.	Type of R	Reporting Person: EP	
Sch	edule 13G		Page of Pages 12
CUSI	P No6	009158106	
1.		Reporting Person and I.R.S. m Mutual Fund Trust 37-14	
2.	Check the (a)(b)X		er of a Group
3.	SEC USE C	ONLY:	
4.	Citizensh	nip or Place of Organizatio	n: Illinois
Num Sha	ber of	5. Sole Voting Power: 0	
Ben	eficially ed by	6. Shared Voting Power: 1	2,014
Eac	•	7. Sole Dispositive Power	: 0
	son With	8. Shared Dispositive Pow	er: 12,014
9.	Aggregate	Amount Beneficially Owned	by each Reporting Person: 12,014
10.	Check Box	if the Aggregate Amount i	n Row 9 excludes Certain Shares:
10.		if the Aggregate Amount i	
11.	Percent o		
11. 12. Sch	Percent of Fedule 13G	of Class Represented by Amo Reporting Person: EP	Page of Pages 12  Issuer & Principal Executive Offices:
11. 12. Sch	Percent of Fedule 13G	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.
11. 12. Scho	Type of Fedule 13G	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC 7201 HAMILTON BLVD. ALLENTOWN, PA 18195-	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.
11. 12. Scho	Type of Fedule 13G	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- ame of Person Filing: State  Compa	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.
11. 12. Sch	Percent of Fedule 13G  1(a) and  2(a). Na	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- ame of Person Filing: State  Compa	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.  1501  Farm Mutual Automobile Insurance my and related entities; See Item 8
11. 12. Sch	Percent of Fedule 13G  1(a) and  2(a). Na	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- ame of Person Filing: State  Compa	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.  1501  Farm Mutual Automobile Insurance any and related entities; See Item 8 khibit A
11. 12. Scho	Percent of Type of Fedule 13G  1(a) and  2(a). Na  2(b). Ac	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- ame of Person Filing: State  Compa	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.  1501  Farm Mutual Automobile Insurance my and related entities; See Item 8 khibit A  s Office: One State Farm Plaza
Item  Item  Item	Percent of Type of Fedule 13G  1(a) and  2(a). Na  2(b). Ac  2(c). Ci	of Class Represented by Amo Reporting Person: EP  (b). Name and Address of  AIR PRODUCTS & CHEMIC. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- Ame of Person Filing: State  Compa and E  Idress of Principal Busines	Page of Pages Pages 12  Issuer & Principal Executive Offices: ALS, INC.  1501  Farm Mutual Automobile Insurance my and related entities; See Item 8 khibit A  s Office: One State Farm Plaza
Item  Item  Item	Percent of Type of Fedule 13G  1(a) and  2(a). Na  2(b). Ac  2(c). Ci  2(d) and  3. This	cof Class Represented by Amo Reporting Person: EP  (b). Name and Address of AIR PRODUCTS & CHEMIC 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- Ame of Person Filing: State  Compa and E  Ridress of Principal Busines  (e). Title of Class of Se  Schedule is being filed, i	Page of Pages  Issuer & Principal Executive Offices:  ALS, INC.  1501  Farm Mutual Automobile Insurance my and related entities; See Item 8  Achibit A  S Office: One State Farm Plaza  Bloomington, IL 61710
Item Item Item Item Item	Percent of Type of Fedule 13G  1(a) and  2(a). Na  2(b). Ac  2(c). Ci  2(d) and  3. This  See E	conting Person: EP  (b). Name and Address of AIR PRODUCTS & CHEMIC 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- Ame of Person Filing: State  Compa and E  ddress of Principal Busines  ctizenship: United States  (e). Title of Class of Se  Schedule is being filed, i	Page of Pages    Page of Pages
Item Item Item Item Item	Percent of Type of Fedule 13G  1(a) and  2(a). Na  2(b). Ac  2(c). Ci  2(d) and  3. This  See E	cof Class Represented by Amo Reporting Person: EP  (b). Name and Address of AIR PRODUCTS & CHEMIC 7201 HAMILTON BLVD. ALLENTOWN, PA 18195- Ame of Person Filing: State  Compa and E  Ridress of Principal Busines  (e). Title of Class of Se  Schedule is being filed, i	Page of Pages    Page of Pages

	(i) Sole Power to vote or to (ii) Shared power to vote or (iii) Sole Power to dispose o (iv) Shared Power to dispose				
Item 5.	Ownership of Five Percent or le	ss of a Class: Not Applicable.			
Item 6.	Ownership of More than Five Per	cent on Behalf of Another Person: N/A			
Item 7.		on 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			
Schedul	e 13G	Page of Pages 10 12			
my know acquire for the influed not ace	O. Certification. By signing be wledge and belief, the securitie ed in the ordinary course of buse purpose of and do not have the ncing the control of the issuer quired in connection with or as ction having such purpose or eff	iness and were not acquired effect of changing or of such securities and were a participant in any			
I cert	reasonable inquiry and to the be ify that the information set for te and correct.				
	01/23/2016	STATE FARM MUTUAL AUTOMOBILE			
	Date	INSURANCE COMPANY			
		STATE FARM LIFE INSURANCE COMPANY			
		STATE FARM FIRE AND CASUALTY COMPANY			
	FARM INSURANCE COMPANIES OYEE RETIREMENT TRUST	STATE FARM INVESTMENT MANAGEMENT CORP.			
SAVII	FARM INSURANCE COMPANIES NGS AND THRIFT PLAN FOR EMPLOYEES	STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM GROWTH FUND			
		STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND			
		STATE FARM MUTUAL FUND TRUST			
	/c/ Daul N. Ecklov				
	/s/ Paul N. Eckley ————————————————————————————————————	/s/ Paul N. Eckley			
Pau: Schedul	l N. Eckley, Fiduciary of each of the above e 13G	Paul N. Eckley, Vice President of each of the above Page of Pages 12			

Item 4(c). Number of shares as to which such person has:

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

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
Name ——	Classification Under Item :	Number of Shares based on on Proceeds of Sale
State Farm Mutual Automobile Insurance Compa	.nv IC	7,068,305 shares
State Farm Life Insurance Company	IC	247,621 shares
State Farm Fire and Casualty Company	IC	1,707,655 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	6,397 shares
State Farm Insurance Companies Employee		,
Retirement Trust	EP	4,006,918 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	12,014 shares
		15,485,710 shares