FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | | |
| STATEMENT OF CHANGES IN DENEFICIAL OWNERSHIP | - 11 | |

| OMB APPRO | VAL | | | | | | | |
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| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |
| | OMB Number: Estimated average burde | | | | | | | |

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* Sherman Scott A | | | | | <u>A</u>] | 2. Issuer Name and Ticker or Trading Symbol AIR PRODUCTS & CHEMICALS INC /DE/ [APD] | | | | | | | | eck all appli Directo V Officer | cable) or (give title | Person(s) to Issuer 10% Owner Other (specif | | ner |
|--|----------|------------------|-----------|------------------------------|---|---|-----|------------------------------------|-------------------|--------------|--|--------------------|---|--|---|--|--|--------------|
| (Last) 7201 HA | | First) BOULEVARD | (Middle) | | | Date 0 /23/2 | | est Trans | saction (N | /lonth | /Day/Year) | | below) | Sr. V.P. | | below) | | |
| (Street) | | | 18195 | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Lin | Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (| • | (Zip) | n Dori | | | | tion An | | Die | | f or Do | noficial | h. Owner | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | 2. Transa | action | 2A. Deemed Execution Date, ir) if any | | | 3. Transa Code (| ction | | | | 5. Amou Securiti Benefic | int of es ially Following | 6. Owner Form: Di (D) or Inc (I) (Instr. | rect c lirect E 4) (| 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | ode V Amount | | (A) or (D) | Price | Transac | Transaction(s) (Instr. 3 and 4) | | | (11150.1.4) |
| Common Stock | | | | 04/23 | 04/23/2009 | | | | | | 9,000 | A | \$28.7 | 8 41 | 41,926 | | | |
| Common Stock | | | | 04/23 | 04/23/2009 | | | | S | | 9,000 | D | \$61.45 | 32 | 32,926 | | | |
| Common | Stock 04 | | | 04/23/ | 2009(2) | | | | J | | 148.56 | A | \$0 | 3,3 | 3,374.81 | |] | By RSP |
| Common | Stock | | | | | | | | | | | | 2,720 I | | | | | By Spouse |
| | | - | Table II | | | | | | | | osed of, convertil | | | / Owned | | | , | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/D | | | n Date, | 4. Transa Code (8) | | n of l | | 6. Date E Expiratio (Month/D | n Date | • | 7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct (I or Indire (I) (Instr | nership m: ect (D) ndirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to | \$28.78 | 04/23/2009 | | | M | | | 9,000 | 08/08/198 | 8(4) | 10/02/2009 | Common Stock | 9,000 | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Actual sales prices ranged from \$61.41 to \$61.52. Details are available upon request.
- 2. Transactions not required to be reported since last filing.
- 3. Employee Stock Options granted under the issuer's Long-Term Incentive Plan.
- 4. These options become exercisable in one-third increments on the first three anniversaries of grant.

Remarks:

Linda M. Svoboda as Attorney in Fact

04/24/2009

** 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.