FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burde	n						

of the Securities	Exchange Ac	t of 1934	

ed average burden hours per response. 05

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNED Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									HIP OMB Number: 3 Estimated average burden hours per response:				3235-0287 0.5						
1. Name and Address of Reporting Person* MCGLYNN MARGARET G (Last) (First) (Middle) 7201 HAMILTON BOULEVARD					2. Issuer Name and Ticker or Trading Symbol <u>AIR PRODUCTS &amp; CHEMICALS INC /DE/</u> [ APD ]  3. Date of Earliest Transaction (Month/Day/Year) 03/31/2008								ationship of F < all applicab Director Officer (g below)	le)	ing Person(s) to Issuer 10% Owner e Other (specify below)				
(Street) ALLEN	FOWN P	A	18195		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. India X	dividual or Joint/Group Filing (Check Applicable I Form filed by One Reporting Person Form filed by More than One Reporting Per						
(City)	(\$	State)	(Zip)																
			Table I - Non	Deriva	ative	Securiti	es A	Acquire	d, D	isposed o	of, or	r Bene	ficially C	wned					
Date				saction 2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	e, Transaction Disposed C Code (Instr.			ties Acquired (A) o I Of (D) (Instr. 3, 4 a				Form:		. Nature of ndirect eneficial wnership nstr. 4)			
							Cod	le V	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(11501.4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)			5. Number of Derivative Securities Acquired (A or Dispose of (D) (Instr 4 and 5)		(A) ed	Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am Securities Und Derivative Sec (Instr. 3 and 4)		Underlying Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Titl		Amount or Number of Shares		(Instr. 4)				
Phantom Stock <sup>(1)</sup>	\$0 <sup>(2)</sup>	03/31/2008		A		311.9926		08/08/19	38 <sup>(3)</sup>	08/08/1988 <sup>(3</sup>		ommon Stock	311.9926	\$93.09	8,132.	1226	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). Under the Plan, all non-employee directors are credited with Units for the portion of their Board retainer required to be received in this form and they are permitted to defer receiving payment of all or a portion of the remainder of their Board and Committee retainers and meeting fees.

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.

Remarks:

Stock<sup>(1)</sup>

## Linda M. Svoboda as Attorney in Fact

04/01/2008

\*\* Signature of Reporting Person Date

Stock

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

 $\ast$  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.