SEC Form 4	
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FORM 4

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

OMB APPROVAL

OMB Number:	3235-0287							
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hours per response:	0.5							

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 OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					0.00	ction 30(n)	01 010			inpuny / tot	01 10 10										
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Davis Lisa Ann					Air Products & Chemicals, Inc. [APD]										ble)		10% Ow	ner			
													^	Officer (aive title		Other (s				
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								below)	give lille		below)	pecity			
1940 AIR PRODUCTS BLVD.					01/26/2023																
						4. If Amondmont, Data of Original Filed (Month/Day/Waar)									6. Individual or Joint/Group Filing (Check Applicable						
(0(1))					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)								
(Street) ALLENTOWN PA 18106-5500												X	X Form filed by One Reporting Person								
ALLENTOWIN FA 10100-3300														Form file Person	ed by Mor	e than	One Report	ing			
(City)	(5	State)	(Zip)																		
		T	able I - Non	-Deriv	ative S	Securitie	s Ac	quired	Dis	posed o	of, or B	enef	icially	Owned							
Date				2. Transa							A) or	or 5. Amount				7. Nature of					
					Day/Year)	Execution Date, if any (Month/Day/Yea		Code	de (Instr.		d Of (D) (Instr. 3, 4		, 4 and 5)	Securities Beneficial Owned Fo	ly	(D) or	r Indirect str. 4)	Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D) P		Price	- Reported Transactio	Reported Transaction(s) (Instr. 3 and 4)		!	Instr. 4)			
											<u> </u>	iu +)									
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of	2.	3. Transaction	3A. Deemed	4.		,		<i>·</i> ·					,	8. Price of	9. Numb	or of	10.	11. Nature			
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Dat if any (Month/Day/Ye	e, Tran Cod	nsaction le (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year) Control (Month/Day/Year) Control (Month				lerlying urity	Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin	ve es ally Ig	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)					
												Δm	ount or		Transaction(s) (Instr. 4)						
				Cod	le V	(A)	(D)	Date Exercisal		Expiration Date	Title	Nu	mber of ares		(
Phantom Stock ⁽¹⁾	\$0.0000 ⁽²⁾	01/26/2023		Α		512.7383	\square	(3)		(3)	Common Stock	51	2.7383	\$312.05	2,274.	1962	D				
Franklan atta																					

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 Fact 01/27/2023

** 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.