FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

asıllığlur,	D.C. 4	20549	

OMB APPROVAL

ı	OMB Number: 3	3235-0287
	Estimated average burder	1
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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*						2. Issuer Name and Ticker or Trading Symbol AIR PRODUCTS & CHEMICALS INC 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)													
MONSER EDWARD L						/DE/ [APD]									Direct	or		10% O	wner
-																r (give title		Other (specify
(Last)	(F	-irst)	(Middle)		3. 0	3. Date of Earliest Transaction (Month/Day/Year)									below)		below)	
7201 HAMILTON BOULEVARD							01/26/2017												
(Street)					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
	TOWN P	A	18195												X Form filed by One Reporting Person				
					.										Form filed by More than One Reporting				
(City)	(6	State)	(Zip)												Perso	n		•	,
(City)	(.	olale)	(Ζιμ)											ļ					
		Tab	le I - Nor	-Deriv	ative	Se	curiti	es Ao	cquired,	Dis	posed	of, or B	enef	icially	y Owne	d			
1. Title of Security (Instr. 3) 2. Transac					action				3.									7. Nature	
Date (Month/Da							Execution Date, ay/Year) if any			Transaction Disposed Of (D) (Instr. 3, 4)			4 and	Beneficially		Form: Direct (D) or Indirect		of Indirect Beneficial	
l control of the cont							(Month/Day/Year)					Owned Reporte					Ownership (Instr. 4)		
								Code	v	Amount	nt (A) or P		rice	Transac	Transaction(s)			(111501.44)	
						Code V Amount (D)						(Instr. 3 and 4)							
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	ed 4	4. Transaction Code (Instr.		on of l		6. Date Exercis		ble and	7. Title and		8	B. Price of	9. Number o	of :	10.	11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any						Expiration Date (Month/Day/Year)			Amount of Securities			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial
(Instr. 3)	Price of	(Worth Day rear)	(Month/Day		8)			rities	(MOIIIII/Da)	Underlying		10	Instr. 5)	Beneficially	/ ı	Direct (D)	Ownership		
Derivative Security						Acquired Derivative Secu (Instr. 3 and 4)						rity		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)		
						Disposed of (D)								Reported Transaction		,,,			
					<u></u>		(Instr. 3, 4 and 5)									(Instr. 4)	1(5)	'	
				L										_					
													Amo	unt					
										_			Num	ber					
				- [,	Code	v	(A)	(D)	Date Exercisable		cpiration ate	Title	of Shai	es					
Phantom Stock ⁽¹⁾	\$0.0000(2)	01/26/2017			A		807		(3)	T	(3)	Common Stock	80)7	\$148.81	7,477.237	1	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).
- 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.

Andrea I. Rennig as Attorney 01/27/2017 in Fact

** 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.