SEC F	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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0.5

hours per response:

$\Box$	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

			or Sec	ction 30(h) of the In	vestment Con	npany Act of 1940						
1. Name and Address of Reporting Person*				er Name <b>and</b> Ticker		ymbol <u>IICALS INC</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FORD W DC	JUGLAS			[APD]			X	Director		Owner		
(Last) 7201 HAMILTO	(First) N BOULEVARD	(Middle)	3. Date 01/23/	of Earliest Transac 2014	tion (Month/D	ay/Year)		Officer (give title below)	Other below	(specify )		
(Street)			4. If Am	nendment, Date of (	Driginal Filed (	(Month/Day/Year)	6. Indi Line)	vidual or Joint/Grou	o Filing (Check A	pplicable		
ALLENTOWN	PA	18195					X	Form filed by On	e Reporting Pers	on		
(City)	(State)	(Zip)						Form filed by Mo Person	re than One Rep	orting		
	Т	able I - No	n-Derivative S	ecurities Acq	uired, Disp	oosed of, or Benefi	cially	Owned				
1. Title of Security	(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Vear)	3. Transaction Code (Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial		

(Month/Day/Year)	if any (Month/Day/Year)	Code ( 8)	Instr.	str. 5)			Beneficially Owned Following Reported	Beneficial Ownership (Instr. 4)	
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1150.4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puis, cans, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nun of Deriva Securi Acquin (A) or Dispos of (D) (Instr. and 5)	tive ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		mount of Derivative ecurities Security nderlying (Instr. 5) erivative Security		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock <sup>(1)</sup>	\$0.0000 <sup>(2)</sup>	01/23/2014		A		1,081		08/08/1988 <sup>(3)</sup>	08/08/1988 <sup>(3)</sup>	Common Stock	1,081	\$111.01	29,270.6854	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.

Linda M. Svoboda as Attorney	01/24/2014
<u>in Fact</u>	01/24/2014

Date

\*\* Signature of Reporting Person

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.