ARCHER DANIELS MIDLAND CO

Form SC 13G February 12, 2014

Schedule 13G

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

SCHEDULE 13G

Under the Securities Exchange Act of 1934

(Amendment No. ____) *

30

| | ARCHER DANIELS MIDLAND COMPANY | | |
|-----------|--|--|--|
| _ | (Name of Issuer) | | |
| | COMMON SHARES | | |
| _ | (Title of Class of Securities) | | |
| 039483102 | | | |
| _ | (Cusip Number) 12/31/2013 | | |
| (Da | ate of Event Which Requires Filing of this Statement | | |

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)
[] Rule 13d-1(c)
[] Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities

Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes). Page ____ of ___ Pages ____ 11 Schedule 13G CUSIP No. ____039483102 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100 2. Check the appropriate box if a Member of a Group (a) ____ (b) ___X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 33,884,596 Shares Beneficially 6. Shared Voting Power: 165,383 7. Sole Dispositive Power: 33,884,596 Each Reporting Person With 8. Shared Dispositive Power: 165,383 9. Aggregate Amount Beneficially Owned by each Reporting Person: 34,049,979 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____ 11. Percent of Class Represented by Amount in Row 9: 5.17 % 12. Type of Reporting Person: IC Schedule 13G Page ____ of ___ Pages ____ 11 CUSIP No. ____039483102 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090 2. Check the appropriate box if a Member of a Group (a) _____ (b) __X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 609,722 Beneficially 6. Shared Voting Power: 37,131 Owned by 7. Sole Dispositive Power: 609,722 Each Reporting Person With 8. Shared Dispositive Power: 37,131 9. Aggregate Amount Beneficially Owned by each Reporting Person: 646,853

10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____

| 11. Percent o | of Class Represented by Amount in Ro | ow 9: 0.10 % |
|--------------------------|---|-----------------------------|
| 12. Type of 1 | Reporting Person: IC | |
| Schedule 13G | | Page of Pages 11 |
| CUSIP No | 039483102 | |
| | Reporting Person and I.R.S. Identifirm Fire and Casualty Company 37-053 | |
| 2. Check the (a)X | e appropriate box if a Member of a (- - | Group |
| 3. SEC USE (| YLNC: | |
| 4. Citizens | nip or Place of Organization: Illino | ois |
| Number of Shares | 5. Sole Voting Power: 4,722,745 | |
| Beneficially Owned by | 6. Shared Voting Power: 21,506 | |
| Each Reporting | 7. Sole Dispositive Power: 4,722, | 745 |
| Person With | 8. Shared Dispositive Power: 21,5 | 06 |
| 9. Aggregate | e Amount Beneficially Owned by each | Reporting Person: 4,744,251 |
| 10. Check Box | x if the Aggregate Amount in Row 9 | excludes Certain Shares: |
| 11. Percent | of Class Represented by Amount in Ro | ow 9: 0.72 % |
| 12. Type of 1 | Reporting Person: IC | |
| Schedule 13G | | Page of Pages 11 |
| CUSIP No | 039483102 | |
| | Reporting Person and I.R.S. Identiform Investment Management Corp. | ication No.: |
| 2. Check the (a) (b)X | e appropriate box if a Member of a (- - | Group |
| 3. SEC USE (| ONLY: | |
| 4. Citizens | nip or Place of Organization: Delawa | are |
| Number of Shares | 5. Sole Voting Power: 4,418,061 | |
| Beneficially Owned by | 6. Shared Voting Power: 57,205 | |
| Each Reporting | 7. Sole Dispositive Power: 4,418, | 061 |
| Person With | 8. Shared Dispositive Power: 57,2 | 05 |

9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,475,266

| 10. Check Box if the Aggregate Amount in Row 9 ex | xcludes Certain Shares: |
|--|------------------------------|
| 11. Percent of Class Represented by Amount in Rov | |
| 12. Type of Reporting Person: IA | _ |
| Schedule 13G | Page of Pages 11 |
| CUSIP No039483102 | |
| 1. Name of Reporting Person and I.R.S. Identific State Farm Insurance Companies Employee Retire | |
| 2. Check the appropriate box if a Member of a Grant (a) (b)X | roup |
| 3. SEC USE ONLY: | <u> </u> |
| 4. Citizenship or Place of Organization: Illino: | is |
| Number of 5. Sole Voting Power: 7,579,489 Shares | |
| Beneficially 6. Shared Voting Power: 22,612 Owned by | |
| Each 7. Sole Dispositive Power: 7,579,48 | 39 |
| Reporting Person With 8. Shared Dispositive Power: 22,612 | 2 |
| 9. Aggregate Amount Beneficially Owned by each I | —Reporting Person: 7,602,101 |
| 10. Check Box if the Aggregate Amount in Row 9 ex | kcludes Certain Shares: |
| 11. Percent of Class Represented by Amount in Rot | √ 9: 1.15 % |
| 12. Type of Reporting Person: EP | _ |
| Schedule 13G | Page of Pages 7 |
| CUSIP No039483102 | |
| 1. Name of Reporting Person and I.R.S. Identific State Farm Insurance Companies Savings and The Employees 37-6091823 | |
| 2. Check the appropriate box if a Member of a Grant (a) (b)X | roup |
| 3. SEC USE ONLY: | <u> </u> |
| 4. Citizenship or Place of Organization: Illino: | _ is |
| Number of 5. Sole Voting Power: 5,080,129 Shares | _ |
| Beneficially 6. Shared Voting Power: 0 | |
| Owned by Each 7. Sole Dispositive Power: 5.080.12 | 29 |

| Reporting Person With 8. Shared Dispositive Power: 0 |
|--|
| 9. Aggregate Amount Beneficially Owned by each Reporting Person: 5,080,129 |
| 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: |
| 11. Percent of Class Represented by Amount in Row 9: 0.77 % |
| 12. Type of Reporting Person: EP |
| Schedule 13G Page of Pages 8 11 |
| Item 1(a) and (b). Name and Address of Issuer & Principal Executive Offices |
| ARCHER DANIELS MIDLAND COMPANY |
| 4666 FARIES PARKWAY DECATUR, ILL 62525-5666 |
| Item 2(a). Name of Person Filing: State Farm Mutual Automobile Insurance |
| Company and related entities; See Item 8 and Exhibit A |
| Item 2(b). Address of Principal Business Office: One State Farm Plaza |
| Bloomington, IL 61710 |
| <pre>Item 2(c). Citizenship: United States</pre> |
| Item 2(d) and (e). Title of Class of Securities and Cusip Number: See above |
| Item 3. This Schedule is being filed, in accordance with 240.13d-1(b). |
| See Exhibit A attached. |
| Item 4(a). Amount Beneficially Owned: 56,598,579 shares |
| Item 4(b). Percent of Class: 8.59 percent pursuant to Rule 13d-3(d)(1). |
| Item 4(c). Number of shares as to which such person has: |
| (i) Sole Power to vote or to direct the vote: 56,294,742 (ii) Shared power to vote or to direct the vote: 303,837 (iii) Sole Power to dispose or to direct disposition of: 56,294,7 (iv) Shared Power to dispose or to direct disposition of: 303,83 |
| Item 5. Ownership of Five Percent or less of a Class: Not Applicable. |
| Item 6. Ownership of More than Five Percent on Behalf of Another Person: N/ |
| Item 7. Identification and Classification of the Subsidiary Which Acquired |

| | the Security being Reported on | by the Parent Holding Company: N/A | | |
|---|--|--|--|--|
| Item 8. | Identification and Classificati | on of Members of the Group: | | |
| | See Exhibit A attached. | | | |
| Item 9. | Notice of Dissolution of Group: | N/A | | |
| Schedul | e 13G | Page of Pages 9 11 | | |
| my know acquire for the influe not ac | O. Certification. By signing be wledge and belief, the securities ed in the ordinary course of bus e purpose of and do not have the noing the control of the issuer quired in connection with or as ction having such purpose or eff | siness and were not acquired e effect of changing or of such securities and were a participant in any | | |
| I cert | Si reasonable inquiry and to the be ify that the information set for te and correct. | | | |
| | 02/07/2014 | STATE FARM MUTUAL AUTOMOBILE | | |
| | Date | INSURANCE COMPANY | | |
| | | STATE FARM LIFE INSURANCE COMPANY | | |
| | | STATE FARM FIRE AND CASUALTY COMPANY | | |
| _ | FARM INSURANCE COMPANIES OYEE RETIREMENT TRUST | STATE FARM INVESTMENT MANAGEMENT CORP. | | |
| SAVI | FARM INSURANCE COMPANIES NGS AND THRIFT PLAN FOR | STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM GROWTH FUND | | |
| 0.5. | EMPLOYEES | STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND | | |
| | | STATE FARM MUTUAL FUND TRUST | | |
| /s | / Paul N. Eckley | /s/ Paul N. Eckley | | |
| Pau Schedul | l N. Eckley, Fiduciary of each of the above e 13G | Paul N. Eckley, Vice President of each of the above Page of Pages | | |

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State Farm Associates' Funds Trust, State Farm Variable Product Trust, and State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

| Schedule 13G | _ | 1 | of | _ Pages |
|--|--------------------------------|-------|---|---------------|
| Name | Classification Under Item 3 | | Number Shares l on Proce of Sa | pased eeds |
| | | _ | | |
| State Farm Mutual Automobile Insurance Compa | ny IC | 34, | 049,979 | shares |
| State Farm Life Insurance Company | IC | | 646,853 | shares |
| State Farm Fire and Casualty Company | IC | 4, | 744,251 | shares |
| State Farm Investment Management Corp. | IA | | 57,205 | shares |
| State Farm Associates Funds Trust - State | | | | |
| Farm Growth Fund | IV | 3, | 477,500 | shares |

| State Farm Associates Funds Trust - State Farm Balanced Fund | IV | 940,561 shares |
|---|----|-------------------------|
| State Farm International Life Insurance | | |
| Company Ltd. | IV | 0 shares |
| State Farm Insurance Companies Employee | | |
| Retirement Trust | EP | 7,602,101 shares |
| State Farm Insurance Companies Savings and | | |
| Thrift Plan for U.S. Employees | EP | |
| Equities Account | | 4,081,897 shares |
| Balanced Account | | 998 , 232 shares |
| State Farm Mutual Fund Trust | IV | 0 shares |
| | | |
| | | 56,598,579 shares |