STATE FARM MUTUAL AUTOMOBILE INSURANCE CO

Form SC 13G/A February 07, 2003

Schedule 13G/A

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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. _____) *

19

	ARCHER DANIELS MIDLAND COMPANY
	(Name of Issuer)
	COMMON SHARES
	(Title of Class of Securities)
	039483102
	(Cusip Number) 12/31/2002
(Date of	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).

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			Z	12
CUSIP	No(394	83102	
		_	rting Person and I.R.S. Identification No.: Nutual Automobile Insurance Company 37-0533100	
2.	Check the (a)X	_	propriate box if a Member of a Group	
3.	SEC USE (ONLY	:	
4.	Citizensh	nip	or Place of Organization: Illinois	
Numb Shar	er of	5.	Sole Voting Power: 33,884,596	
	ficially d by	6.	Shared Voting Power: 0	
Each	_	7.	Sole Dispositive Power: 33,884,596	
_	_	8.	Shared Dispositive Power: 167,918	_
9.	Aggregate	e Am	ount Beneficially Owned by each Reporting Perso	n: 34,052,514
10.	Check Box	k if	the Aggregate Amount in Row 9 excludes Certain	Shares:
11.	Percent o	of C	lass Represented by Amount in Row 9: 5.26 %	
12.	Type of B	Repo	rting Person: IC	

Schedule 13G Page ____ of ___ Pages ___ 3 12 CUSIP No. ___039483102 ___

^{1.} Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090

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2. Check the	e appropriate box if a Member of a Group	
(a) (b)X_		
3. SEC USE (ONLY:	
4. Citizensh	hip or Place of Organization: Illinois	
Number of Shares	5. Sole Voting Power: 549,122	
Beneficially Owned by	6. Shared Voting Power: 0	
Each Reporting	7. Sole Dispositive Power: 549,122	
Person With	8. Shared Dispositive Power: 8,538	
9. Aggregate	e Amount Beneficially Owned by each Reporting Person: 557,660)
10. Check Box	x if the Aggregate Amount in Row 9 excludes Certain Shares: _	
11. Percent o	of Class Represented by Amount in Row 9: 0.08 %	
12. Type of I	Reporting Person: IC	

Sch	edule 13G	Page		_of	_ Pages
CUSI	P No039483102				
1.	Name of Reporting Person and I.R.S. Identific State Farm Fire and Casualty Company 37-05330		No.:		
2.	Check the appropriate box if a Member of a Gr. (a) (b)X	oup			

3. SEC USE ONLY:

4	0:4:		D1		0	T112-22-2
4.	Citizenship	or	Place	ΟI	Organization:	IIIInois

Person With 8. Shared Dispositive Power: 21,219

Number of 5. Sole Voting Power: 4,722,745

Shares
Beneficially 6. Shared Voting Power: 0

Owned by
Each 7. Sole Dispositive Power: 4,722,745

Reporting

9. Aggregate Amount Beneficially Owned by each Reporting Person: 4,743,964

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

11. Percent of Class Represented by Amount in Row 9: 0.73 %

12. Type of Reporting Person: IC

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CUSIP No. ____039483102 ____

1. Name of Reporting Person and I.R.S. Identification No.: State Farm Investment Management Corp. 37-0902469

- 2. Check the appropriate box if a Member of a Group
 - (a) _____
 - (b) __X__
- 3. SEC USE ONLY:
- 4. Citizenship or Place of Organization: Delaware

Number of 5. Sole Voting Power: 4,418,061

	6. Shared Voting Power: 22,156	
Owned by Each Reporting	7. Sole Dispositive Power: 4,418,061	
Person With	8. Shared Dispositive Power: 22,156	
9. Aggregate	e Amount Beneficially Owned by each Reporting Person: 4	,440,217
10. Check Box	ox if the Aggregate Amount in Row 9 excludes Certain Sha	res:
11. Percent o	of Class Represented by Amount in Row 9: 0.68 %	
12. Type of F	Reporting Person: IA	
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CUSIP No(
	Reporting Person and I.R.S. Identification No.:	
	arm Insurance Companies Employee Retirement Trust 36-604	2145
	ne appropriate box if a Member of a Group	
(a) (b)X		
3. SEC USE C	ONLY:	
4. Citizensh	ship or Place of Organization: Illinois	
Number of	5. Sole Voting Power: 7,579,489	
_	6. Shared Voting Power: 0	
Owned by Each Reporting	7. Sole Dispositive Power: 7,579,489	
Vebor criid		

Person	With	8.	Shared	Dispositive	Power:	17.	189

9. A	Aggregate	Amount	Beneficially	Owned	by	each	Reporting	Person:	7,596,678
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- 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____
- 11. Percent of Class Represented by Amount in Row 9: 1.17 %
- 12. Type of Reporting Person: EP

CUSIP No. ___039483102

- Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823
- 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 S. Sole Voting Power: 5,080,129
Shares
Beneficially 6. Shared Voting Power: 0
Owned by
Each 7. Sole Dispositive Power: 5,080,129
Reporting
Person With 8. Shared Dispositive Power: 0

9. Aggregate Amount Beneficially Owned by each Reporting Person: 5,080,129

10.	Check Bo	x if the Aggregate Amount in Row 9 ex	ccludes Certain Shares:
11.	Percent	of Class Represented by Amount in Row	v 9: 0.78 %
12.	Type of	Reporting Person: EP	
	edule 13G		Page of Pages 12
1.	Name of 1	Reporting Person and I.R.S. Identific rm Mutual Fund Trust	cation No.:
2.	Check the (a)X_		coup
3.	SEC USE	ONLY:	_
4.	Citizens	hip or Place of Organization:	_
	ber of	5. Sole Voting Power: 31,850	_
Ben	res	6. Shared Voting Power: 0	
Eac		7. Sole Dispositive Power: 31,850	
	orting son With	8. Shared Dispositive Power: 0	
9.	Aggregat	e Amount Beneficially Owned by each F	— Reporting Person: 31,850
10.	Check Box	x if the Aggregate Amount in Row 9 ex	 ccludes Certain Shares:
11.	Percent	of Class Represented by Amount in Row	y 9: 0.00 %
12.	Type of 1	Reporting Person: IV	_

Page ____ of ___ Pages ____ 12 Schedule 13G Item 1(a) and (b). Name and Address of Issuer & Principal Executive Offices: ARCHER DANIELS MIDLAND COMPANY 4666 FARIES PARKWAY BOX 1470 DECATUR, ILL. 62525 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 Item 2(c). Citizenship: United States 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: 56,503,012 shares Item 4(b). Percent of Class: 8.73 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: 56,274,192 (ii) Shared power to vote or to direct the vote: 22,156

(iii) Sole Power to dispose or to direct disposition of: 56,274,192 (iv) Shared Power to dispose or to direct disposition of: 237,020

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/A

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 Classification of Members of the Group: See Exhibit A attached.

Item 9. Notice of Dissolution of Group: N/A

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Item 10. Certification. By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

01/29/2003 STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY Date STATE FARM LIFE INSURANCE COMPANY STATE FARM FIRE AND CASUALTY COMPANY STATE FARM INSURANCE COMPANIES STATE FARM INVESTMENT MANAGEMENT EMPLOYEE RETIREMENT TRUST CORP. STATE FARM INSURANCE COMPANIES STATE FARM ASSOCIATES FUNDS
SAVINGS AND THRIFT PLAN FOR TRUST - STATE FARM GROWTH TRUST - STATE FARM GROWTH FUND

SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES

> STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND

STATE FARM MUTUAL FUND TRUST

STATE FARM VARIABLE PRODUCT TRUST

/s/Paul N. Eckley /s/Paul N. Eckley

Paul N. Eckley, Fiduciary of each of the above Paul N. Eckley, Vice President of each of the above

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company which might be deemed to constitute a "group" with regard to the ownership of shares reported herein. By way of explanation, State Farm Mutual Automobile Insurance Company is the parent of wholly owned subsidiaries, State Farm Life Insurance Company, which is the parent of the wholly owned subsidiary State Farm Life and Accident Assurance Company; State Farm Fire and Casualty Company; and, State Farm Investment Management Corp. State Farm Investment Management Corp. acts as the investment advisor to State Farm Associates Funds Trust - State Farm Growth Fund and State Farm Associates Funds Trust - State Farm Balanced Fund , State Farm Variable Product Trust, and State Farm Mutual Fund Trust. The Investment Committees of the Board of Directors of each of the insurance companies and of the State Farm Investment Management Corp. and the Trustees of the State Farm Insurance Companies Employee Retirement Trust, State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees, State Farm Variable Product Trust, and State Farm Mutual Fund Trust are vested with the responsibility for investing the assets of the companies, the Funds, the Trusts, and the Equities Account and the Balanced Account of the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees. State Farm Mutual Automobile Insurance Company employs all personnel of the Investment Department. State Farm Investment Management Corp. has a written agreement with State Farm Mutual Automobile Insurance Company whereby the Investment Department personnel assist State Farm Investment Management Corp. in its duties as investment advisor to the Funds, State Farm Variable Product Trust, and State Farm Mutual Fund Trust. Investment actions taken by the Investment Department are ratified by the Investment Committees of the Boards of Directors of the insurance companies and State Farm Investment Management Corp. and by the Trustees of the Trusts and the Plan. Certain members of the Investment Department also execute voting proxies from time to time but in situations where a vote contrary to that of management on a major policy matter is under consideration, approval of the Investment Committees of the Boards of Directors of the Companies involved is first obtained.

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".

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Name	Classific Under It		Number Shares h on Proce of Sai	pased eeds
State Farm Mutual Automobile Insurance Compar	ny IC	34	,052,514	shares
State Farm Life Insurance Company	IC		557 , 660	shares
State Farm Life and Accident Assurance Compar	ny IC		0	shares
State Farm Fire and Casualty Company	IC	4	,743,964	shares
State Farm Investment Management Corp.	IA		0	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 Variable Product Trust	IV		22,156	shares
State Farm Insurance Companies Employee				
Retirement Trust	EP	7	,596,678	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		31,850	shares
			,503,012	aharos
		20	, 505, 012	SHALES