FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 | |
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* <u>LAWTON GREGORY E</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol STEPAN CO [SCL] | | | | | | | | | | ck all app | , | | | |
|--|--|--|---------------------------------|-------------------------------|---|---|-------------|---|---|-----|--------------------------|--|---|----------------------------|--|---|---|--|--|
| (Last) (First) (Middle) 22 W. FRONTAGE ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2020 | | | | | | | | | Office | er (give title /) | | Other (sbelow) | specify |
| (Street) NORTH | FIELD IL | | 0093 Zip) | | 4. If <i>F</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Form | or Joint/Group Filing (Check Applicable In filed by One Reporting Person In filed by More than One Reporting | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | 3ene | ficial | y Own | ed | | | |
| Date | | | 2. Transac Date (Month/Da | | Exe if an | . Deemed ecution Date, any onth/Day/Year) | | 3. 4. Securitie Disposed (Code (Instr. 8) | | | | | 5. Amo Securit Benefic Owned Report | ies cially Following | Form (D) or | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa | action(s) 3 and 4) | | | |
| Common | Common Stock | | | 08/05/2 | ′2020 | | | | S | | 1,087 | I |) | \$110 | 16,041 | | | D | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, 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) | if any | emed on Date, Day/Year) | 4. Transaction Code (Instr. 8) | | of Deriv | r osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiratio Exercisable Date | | te ear) Expiration | Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of | | str. D Si (li | Price of erivative ecurity 1str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4) | y G | 10. Ownership Form: Direct (D) Or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

/s/ Stephanie J. Pacitti,

08/07/2020 Attorney-in-fact for Gregory

E. Lawton

** 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.