FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
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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* REED JAN STERN						2. Issuer Name and Ticker or Trading Symbol STEPAN CO [SCL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 22 WEST FRONTAGE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 04/26/2016									X		er (give title		10% O Other (below)	(specify	
(Street) NORTHFIELD IL 60093 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	Forn	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date			n Date,	Code (Instr. 5)						Securi Benefi	icially d Following	6. Owr Form: (D) or (I) (Ins	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A)	or I	Price	Transa	ansaction(s) str. 3 and 4)			(111301. 4)	
Common Stock 0				04/26	/2016				A	A 1,2) A \$		\$0.00		2,290		D		
		Та	ble II - D								sed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Code (Inst				6. Date E Expiration (Month/I	on Dat	Amount of		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow Fo Dir or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	per						

Explanation of Responses:

Remarks:

Kathleen O. Sherlock, Attorney-in-fact

04/28/2016

** 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.