| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| |
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

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

| OMB APP | ROVAL |
|-------------|----------|
| OMB Number: | 3235-028 |

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|--------------------------|-----|
| hours per response: | 0.5 |
| | |

| 1. Name and Address of Reporting Person* <u>Behrens Scott R.</u> | | | 2. Issuer Name and Ticker or Trading Symbol <u>STEPAN CO</u> [SCL] | | 5. Relationship of Reporting Person(s) to Issue Check all applicable) Director 10% Own | | | | |
|---|---------------|----------------------|--|------------------------|---|-----------------------------------|--|--|--|
| (Last) (First) (Middle) 22 W. FRONTAGE ROAD | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/25/2015 | Х | Officer (give title below) VP/GM Surfact | Other (specify below) tants | | | |
| (Street) NORTHFIELD (City) | IL (State) | 60093 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing (Form filed by One Repor Form filed by More than (Person | ting Person | | | |
| | • | Table I - Non-Deriva | tive Securities Acquired, Disposed of, or Benefi | cially (| Owned | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|---|------------------------------|---|---|---------------|---|---|---|------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 02/25/2015 | | Р | | 100 | A | \$40.29 | 3,277.555 | D | |
| Common Stock | 02/25/2015 | | Р | | 100 | A | \$40.3 | 3,377.555 | D | |
| Common Stock | 02/25/2015 | | Р | | 100 | A | \$40.51 | 3,477.555 | D | |
| Common Stock | | | | | | | | 2,986.921 | I | By ESOP II Trust |

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

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|---|---|--|---|------------------------------|------|--|---|--|--------------------|---|---|---|--|--|--|
| 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. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5 | ative rities ired osed . 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | ate | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 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 | | | | |

Explanation of Responses:

Remarks:

Scott R. Behrens

02/27/2015

** 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.