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 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 APPR	OVAL
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1. Nume and Address of Reporting reison			2. Issuer Name and Ticker or Trading Symbol <u>STEPAN CO</u> [SCL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SILFANTQ	<u>UIININ JIN</u>			X	Director	10% Owner			
(Last)	.ast) (First) (Mide		3. Date of Earliest Transaction (Month/Day/Year)	X	Officer (give title below)	Other (specify below)			
22 W. FRONTAGE ROAD			11/16/2017		Chairman, President & CEO				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing (C	Check Applicable			
NORTHFIELD	IL	60093		Х	Form filed by One Reporti	ng Person			
(City)	(State)	(Zip)			Form filed by More than C Person	ne Reporting			

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

Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transa Code (8)		Disposed O 5)	s Acquired f (D) (Instr	. 3, 4 and	5. Amount of Securities Beneficially Owned Following	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)		
11/16/2017		G	v	170	D	\$ <mark>0</mark>	142,015.762	D	
11/16/2017		G	v	170	D	\$0	598	I	By Spouse
							104,423	D ⁽¹⁾	
							10,925.589	I	By Esop II Trust
							160,000	I	By Family LLC ⁽²⁾
							48,000	I	By Family Trust ⁽²⁾
							54,978	I	By Family Trust III
							40,000	I	By Family Trust IV ⁽²⁾
-	(Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year) 11/16/2017	(Month/Day/Year) if any (Month/Day/Year) Code (8) 11/16/2017 G	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 11/16/2017 G V	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount 11/16/2017 G V 170	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) 11/16/2017 G V 170 D	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code (Instr. (D) 5) Code V Amount (A) or (D) Price 11/16/2017 G V 170 D \$0	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title Amour Securi Under Deriva Securi and 4)	nt of ties ying	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:

1. Joint Tenancy with Spouse.

2. The Reporting Person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for the purpose of Section 16 or for any other purpose.

/s/ Matthew M. Rice, attorney-12/01/2017

in-fact for F. Quinn Stepan, Jr.

** 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.