FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D).C. 2	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPRO	JVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
1	hours por rosponso:	0.5							

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* <u>Behrens Scott R.</u>					2. Issuer Name and Ticker or Trading Symbol STEPAN CO [SCL]									eck all appli Directo	onship of Reporting II applicable) Director Officer (give title		Person(s) to Issuer 10% Owner		
(Last) 22 W. FI	(F RONTAGE	*	(Middle)			Date of Earliest Transaction (Month/Day/Year) 3/13/2015								X Officer below)		title Other (speci below) GM Surfactants		респу	
(Street) NORTH (City)			60093 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	dividual or Joint/Group Filing (Check Applicable) Grown filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - No	n-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or	Ben	eficial	ly Owned	i			
Date				/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	((A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock			03/13	3/201	/2015					14.44	[1)	A	\$39.4	1 3,691.995			D	
Common Stock													3,000	3,000.825(2)		I 1	By ESOP II Trust		
		-	Table II -								osed of, converti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. B)				6. Date E Expiratio (Month/D	n Date		7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e O s Fe ally D or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares					
Share	(4)	03/13/2015			A		38.514		(5)		(5)	Comi		38.514	\$39.41 ⁽⁶⁾	8,470.9	93	D	

Explanation of Responses:

- 1. Reflects acquisition of deferred share units under the Performance Award Deferred Compensation Plan ("Plan") pursuant to a dividend equivalent feature of the Plan.
- 2. Reflects ESOP II acquisitions that have occurred since the Reporting Person's last ownership report covering ESOP II holdings.
- 3. Share Units are acquired under the Management Incentive Plan Amended and Restated as of January 1, 2010 ("MIP"), a nonqualified deferred compensation plan which allows MIP participants to elect to defer all or a portion of their deferred compensation into accounts pursuant to MIP provisions.
- 4. Share Units convert on a one-for-one basis into Common Stock.
- 5. Reflects acquisition of Share Units pursuant to a dividend equivalent feature of the MIP, generally payable at end of employment, unless otherwise elected.
- 6. Price reported is the price of Common Stock on the date the dividend equivalents are payable pursuant to a dividend equivalent feature of the MIP.

Remarks:

Scott R. Behrens

03/17/2015

** 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.