FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO               | VAL       |
|---|-------------------------|-----------|
|   | OMB Number:             | 3235-0287 |
| l | Estimated average burde | en        |
| l | hours per response:     | 0.5       |

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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* WEHMER EDWARD J                      |   |               |  |          |   | 2. Issuer Name and Ticker or Trading Symbol STEPAN CO [ SCL ] |   |          |  |      |  |                 |  | Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |  |  |  |                                       |
|---|---|---------------|--|----------|---|---|---|----------|--|------|--|-----------------|--|--|---|--|--|--|---------------------------------------|
| WERIVIER EDWARD J   |   |               |  |          |   |   |   |          | _  |      |  |                 |  | X  | Directo   | r  |  | 10% O  | wner                                  |
| (Last) (First) (Middle)   |   |               |  |          |   |   | 3. Date of Earliest Transaction (Month/Day/Year) 04/22/2008 |          |  |      |  |                 |  |  | Officer<br>below)                                   | (give title  |  | Other (s   | specify                               |
| 22 WEST FRONTAGE ROAD   |   |               |  |          |   |   | 000   |          |  |      |  |                 |  |  |   |  |  |  |                                       |
| 1120  |   | 102 110112    |  |          | <u> </u>                                |   |   |          |  |      |  | n., .           | -  |  |   |  |  | /=! ! !  |                                       |
| (Street)  |   |               |  |          |   | If Amendment, Date of Original Filed (Month/Day/Year)         |   |          |  |      |  |                 |  | 6. Individual or Joint/Group Filing (Check Applicable Line)          |   |  |  |  |                                       |
| NORTH   | FIELD II  |               | 60093  |          |   |   |   |          |  |      |  |                 |  |  | X Form filed by One Reporting Person                |  |  |  | on                                    |
|   |   |               |  |          |   |   |   |          |  |      |  |                 |  | Form filed by More than One Reporting<br>Person                      |   |  |  |  |                                       |
| (City) (State) (Zip)  |   |               |  |          |   |   |   |          |  |      |  |                 |  |  |   |  |  |  |                                       |
|   |   | <b>T</b> . I. | l- I NI  |          | - 41                                    |   |   | - • -    |  |      |  | D .             |  |  | 0   |  |  |  |                                       |
|   |   | ıab           | le I - Non                                     | 1-Deriv  | ative                                   | Sec   | curitie   | S AC     | quirea, i  | וצוכ | oosea c                                  | or, or Be       | enetic   | ıaııy  | Owned   | 1  |  |  |                                       |
| 1. Title of Security (Instr. 3) 2. Transac Date                               |   |               |  |          |   | 6   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |          | e, Transaction Disposed<br>Code (Instr. 5)               |      | ities Acquii<br>d Of (D) (In:            |                 | and Securitie  |  | es For  |  | wnership<br>m: Direct                    | 7. Nature<br>of Indirect   |                                       |
|   |   |               |  |          | nth/Day/Year)                           |   |   |          |  |      |  |                 | Benefici<br>Owned I<br>Reporte   |  | Following (I) (                                     |  | Instr. 4)                                | Beneficial<br>Ownership  |                                       |
|   |   |               |  |          |   |   |   |          | Code   | v    | Amount                                   | (A) or (D)      |  | е  | Transact<br>(Instr. 3                               | tion(s)  |  |  | (Instr. 4)                            |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |               |  |          |   |   |   |          |  |      |  |                 |  |  |   |  |  |  |                                       |
|   |   | '             |  |          |   |   |   |          | uirea, Di<br>s, option:                                  |      |  |                 |  |  | wnea  |  |  |  |                                       |
|   |   | 1             |  | (e.g., p | uts,                                    | Cans  | , waii  | ants     | s, option  | s, c | Uliverti                                 | DIE SECI        | urities  | "  |   |  |  |  |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |               | 3A. Deeme<br>Execution<br>if any<br>(Month/Day | Date,    | 4.<br>Transaction<br>Code (Instr.<br>B) |   | n of  |          | 6. Date Exercisab<br>Expiration Date<br>(Month/Day/Year) |      | Amoun<br>Securiti<br>Underly<br>Derivati |                 | Title and mount of ecurities nderlying erivative Security nstr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Own<br>Forn<br>Direc<br>or In<br>(I) (Ir | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |               |  | ⊢        |   |   |   | $\vdash$ |  | _    |  |                 | A  |  |   |  |  |  |                                       |
|   |   |               |  |          |   |   |   |          |  |      |  |                 | Amou<br>or   | nt   |   |  |  |  |                                       |
|   |   |               |  |          | Code                                    | v   | (A)   | (D)      | Date<br>Exercisable                                      |      | xpiration<br>ate                         | Title           | Numb<br>of<br>Share  |  |   |  |  |  |                                       |
| Stock<br>Option   | \$41.51   | 04/22/2008    |  |          | A                                       |   | 1,069   |          | 04/22/2010   | 04   | 4/21/2016                                | Common<br>Stock | 1,06   | 9  | \$41.51   | 1,069  |  | D  |                                       |

**Explanation of Responses:** 

Remarks:

<u>Kathleen O. Sherlock, by</u>

<u>Power of Attorn ey for Edward 04/23/2008</u>

<u>J. Wehmer</u>

\*\* 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.