FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

to Sec obliga	this box if no lo tion 16. Form 4 tions may contin tion 1(b).	or Form 5	STA		pursua	ant to S	ectic	on 16(a)	of the S	Securit	NEFICIA ties Exchang mpany Act o	e Act of		RSHIP	Estim		ber: Saverage burde esponse:	3235-0287 en 0.5
1. Name and Address of Reporting Person* Kabbes David					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% Owne v Officer (give title Other (spec				wner	
(Last) (First) (Middle) 1101 SKOKIE BOULEVARD, SUITE 500					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2023								X Oncer (give the other (specify below) below) VP GC & Secretary					
(Street) NORTHBROOK IL 60062					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(50	· · ·	Zip)	on-Deriva	tive S	Secur	ritie	s Aco	wired	Dis	posed of	or Be	enefic	ially Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8)			s Acquire	d (A) or	nd 5. Am Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(
Common Stock 02/17/2						.023			A		90.31	A	\$109	0.49 2	98.289		Ι	By ESOP II Trust
		Tal	ole II ·								osed of, o convertib				d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)					

Explanation of Responses:

/s/ Stephanie J. Pacitti,

Number

Shares

of

Attorney-in-Fact for David G. 02/21/2023

Kabbes

Title

Expiration Date

** 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).

Code V

(A) (D)

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.

Date Exercisable