## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	205/19
vvasiiiiiqtuii,	D.C.	20049

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	OWNERSHIP

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

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*  WOOD ROBERT JOHN  (Last) (First) (Middle)  22 W. FRONTAGE ROAD  (Street)  NORTHFIELD IL 60093				3. 03	2. Issuer Name and Ticker or Trading Symbol STEPAN CO [ SCL ]  3. Date of Earliest Transaction (Month/Day/Year) 03/15/2010  4. If Amendment, Date of Original Filed (Month/Day/Year)						6. In Line	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  V.P. & General Manager  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)	(5	,	(Zip)	<u> </u>						, -	<i>a</i>					
Table I - Non-Derive  1. Title of Security (Instr. 3)  2. Transa Date (Month/E				ansactio	action 2A. Deemed Execution Date,			quired, Disposed of, or Benefic  3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			ed (A) or	or 5. Amount of		Ownership orm: Direct O) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			
		-	Table II - Deri (e.g.					uired, Dis s, options,				Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversio or Exercis Price of Derivative Security			3A. Deemed Execution Date, if any (Month/Day/Year	4. Trans Code	4. Transaction Code (Instr. 8) 5. Numbe of Derivative Securities Acquired (A) or Disposed		Number Expiration Date (Month/Day/Year)  (In the control of the co				8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Share Units <sup>(1)</sup>	(2)	03/15/2010		A		62.454		(3)	(3)	Common Stock	62.454	\$53.44 <sup>(4)</sup>	13,968.9	D		
Share Units <sup>(1)</sup>	(2)	06/15/2010		A		47.802		(3)	(3)	Common Stock	47.802	\$69.82 <sup>(4)</sup>	14,016.702	. D		
Share Units <sup>(1)</sup>	(2)	09/15/2010		A		56.33		(3)	(3)	Common Stock	56.33	\$59.25 <sup>(4)</sup>	14,073.032	2 D		
Share	(2)	12/15/2010		A		48.384		(3)	(3)	Common	48.384	\$74.73 <sup>(4)</sup>	14,121.416	5 D		

## **Explanation of Responses:**

- 1. Share Units are acquired under the Management Incentive Plan Amended and Restated as of January 1, 2010 ("Plan), a nonqualified deferred compensation plan which allows Plan participants to elect to defer all or a portion of their deferred compensation into accounts pursuant to Plan provisions.
- 2. Share Units convert on a one-for-one basis into Common Stock.
- 3. Reflects acquisition of Share Units pursuant to a dividend equivalent feature of the Plan, generally payable at end of employment, unless otherwise elected.
- 4. Price reported is the price of Common Stock on the date the dividend equivalents are payable pursuant to a dividend equivalent feature of the Plan.

Robert John Wood 02/22/2011 \*\* 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.