FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

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Name and Address of Reporting Person*     Catlett Janet Anne						2. Issuer Name and Ticker or Trading Symbol STEPAN CO [ SCL ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) 22 WES	(F Γ FRONT		ate of 13/20		t Trans	saction (N	Month	/Day/Year)		X Officer (give title Other (specify below)  VP, CHRO									
(Street) NORTH	FIELD II	4. If	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							
		Tab	le I - No	n-Deriv	ative	Sec	uritie	s Ac	auired	. Dis	sposed o	of. or	Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)					ction	tion 2A. Deemed Execution Date,			3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, Code (Instr. 3)			(A) or	5. Amount of Securities Beneficially Owned Followin			: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A (C	() or ()	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	2020		P		1.013		A	\$95.86	2,83	34.127	D								
Common Stock															117	117.269 <sup>(1)</sup>			By Esop II Trust
		7	able II -								osed of converti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code ( 8)				6. Date Exercis Expiration Date (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly O Fo O (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares					
Share Units <sup>(2)</sup>	(3)	03/13/2020			A		4.457		(4)		(4)	Comr		4.457	\$82.99 <sup>(5)</sup>	1,349.6	7	D	
Share Units <sup>(2)</sup>	(3)	06/15/2020			A		3.863	П	(4)		(4)	Comr		3.863	\$96.08 <sup>(5)</sup>	1,353.53	33	D	

## **Explanation of Responses:**

- 1. Reflects ESOP II acquisitions that have occurred since the Reporting Person's last ownership report covering ESOP II transactions.
- 2. Share Units are acquired under the Management Incentive Plan (As Amended and Restated Effective January 1, 2015) ("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.
- 3. Share Units convert on a one-for-one basis into Common Stock.
- 4. Reflects acquisition of Share Units pursuant to a dividend equivalent feature of the MIP, generally payable at end of employment, unless otherwise elected.
- 5. 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.

/s/ Stephanie J. Pacitti,

Attorney-in-Fact for Janet A. 06/17/2020

Catlett

\*\* 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.