FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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| OMB APPRO                | VAL       |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|
| 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 A   |   | 2. Issuer Name and Ticker or Trading Symbol STEPAN CO [ SCL ] |  |                              |   |       |     |  |    | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner |                              |  |  |  |                |  |  |  |
|---|---|---|--|------------------------------|---|-------|-----|--|----|---|------------------------------|--|--|--|----------------|--|--|--|
| (Last) (First) (Middle) 22 W. FRONTAGE ROAD                   |   |   |  |                              | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2009 |       |     |  |    |   |                              |  | Office<br>below  | (give title  |                | Other (s<br>below)   | specify  |  |
| (Street) NORTHFIELD IL 60093  (City) (State) (Zip)            |   |   |  |                              | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |       |     |  |    |   |                              |  | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |                |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |   |   |  |                              | ction 2A. Deemed Execution Date,                            |       |     | Transaction Disposed Code (Instr. 5)                     |    |   | es Acquired<br>Of (D) (Insti | d (A) or                               | 5. Amou<br>Securiti<br>Benefic   | nt of<br>es<br>ally<br>Following   | Form<br>(D) or | Ownership<br>rm: Direct<br>or Indirect<br>(Instr. 4)                     | 7. Nature of Indirect Beneficial Ownership (Instr. 4)              |  |
|   |   |   |  | ative S                      | ive Securities Acqu   |       |     | Code v   |    | Amount<br>sed of,   | (A) or Price                 |  | Transac<br>(Instr. 3   | saction(s)<br>r. 3 and 4)  |                |  |  |  |
|   |   |   |  |                              |   |       |     | options,   |    |   |                              |  |  |  |                |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year)                    | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year | 4.<br>Transa<br>Code (<br>8) |   | on of |     | 6. Date Exercisab<br>Expiration Date<br>(Month/Day/Year) |    | e Amount of   |                              | f<br>g<br>Security                     | 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) | e<br>s<br>ally | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |   |  | Code                         | v   | (A)   | (D) | Date<br>Exercisable                                      |    | xpiration<br>ate  | Title                        | Amount<br>or<br>Number<br>of<br>Shares |  |  |                |  |  |  |
| Directors<br>Deferred<br>Compensation<br>Plan                 | \$60.08   | 10/01/2009  |  | J                            |   | 260   |     | 08/08/1988   | 08 | 8/08/1988   | Common<br>Stock              | 260                                    | \$60.08  | 495  |                | D  |  |  |

Explanation of Responses:

Kathleen O. Sherlock, By

Power of Attorney for Gary E. 10/05/2009

**Hendrickson** 

\*\* 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.