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STEPAN CO)									
Form 4 March 17, 20	115									
									OMB AF	PROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. SECURITIES SECURITIES					Expires: Estimated a burden hou response	•				
(Print or Type R	Responses)									
1. Name and Address of Reporting Person <u>*</u> Behrens Scott R.			2. Issuer Name and Ticker or Trading Symbol STEPAN CO [SCL]				ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Mon			(Month/D	Date of Earliest Transaction Month/Day/Year) 3/13/2015				Director 10% Owner XOfficer (give title Other (specify below) below) VP/GM Surfactants		
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NORTHFIE	LD, IL 60093							Form filed by M Person	Iore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	c) Executio any		3. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ties Adisposed 4 and (A) or	cquired d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Stock	03/13/2015			Code V A	Amount 14.44 (1)	(D) A	Price \$ 39.41	3,691.995	D	
Common Stock								3,000.825 <u>(2)</u>	Ι	By ESOP II Trust

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	e 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of iorDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day/	Date	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pr Deriv Secu (Insti
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Share Units <u>(3)</u>	<u>(4)</u>	03/13/2015		А	38.514	(5)	(5)	Common Stock	38.514	\$ 3

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Behrens Scott R. 22 W. FRONTAGE ROAD NORTHFIELD, IL 60093			VP/GM Surfactants				
Signatures							

Signatures

Scott R. Behrens	03/17/2015
<u>**</u> Signature of Reporting Person	Date

Explanation of Responses:

*	If the form is filed by more than one reporting person, <i>see</i> 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).
(1)	Reflects acquisition of deferred share units under the Performance Award Deferred Compensation Plan ("Plan") pursuant to a dividend equivalent feature of the Plan.
(2)	Reflects ESOP II acquisitions that have occurred since the Reporting Person's last ownership report covering ESOP II holdings.
(3)	Share Units are acquired under the Management Incentive Plan Amended and Restated as of January 1, 2010 ("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.
(4)	Share Units convert on a one-for-one basis into Common Stock.
(5)	Reflects acquisition of Share Units pursuant to a dividend equivalent feature of the MIP, generally payable at end of employment, unless otherwise elected.
(6)	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.
Note: File th	ree copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.