FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* ARTHUR VICKI B						2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]								ck all applica Director	ıble)	rting Person(s) to Issuer 10% Owner tle Other (specify		ner	
(Last) (First) (Middle) ONE NORTH SECOND ST P O BOX 160					3. Date of Earliest Transaction (Month/Day/Year) 02/14/2018								^	SVP Plastic Pkg/Protective					
,			9551-0160		4. If	Amer	ndment, [Date of	Original Filed (Month/Day/Ye			⁄ear)	Line)	Line) X Form filed by C			up Filing (Check Applicable one Reporting Person lore than One Reporting		
(City)	(Sta		Zip) D le I - Non -	.Deriv	ative	e Se	curitie	s Arr	nuired	Disr	nosed of	or Bene	ficially	Owned					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquir Disposed Of (D) (In:		(A) or	5. Amount Securities Beneficial Owned Fo	ly (6. Own Form: I (D) or li (I) (Inst	Direct I ndirect E r. 4) (7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 ar	ction(s)		((Instr. 4)	
			Table II - D								sed of, o			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da if any (Month/Day/)		ransaction		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercise Expiration Date (Month/Day/Yea		е	7. Title and of Securiti Underlying Derivative (Instr. 3 and	es g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				С	ode	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Restricted Stock Units	\$0.0000(1)	02/14/2018			A		3,845		02/14/203	19 ⁽²⁾	02/14/2028	Common Stock	3,845	\$0.0000	3,845		D		
Restricted Stock Units II	\$0.0000(1)	02/14/2018			A		340		(3)		(3)	Common Stock	340	\$0.0000	1,674		D		
Restricted Stock Units II	\$0.0000(1)	02/14/2018			F			11 ⁽⁴⁾	(3)		(3)	Common Stock	11	\$50.83	1,663		D		
Stock Appreciation Right	\$50.83	02/14/2018			A		28,054		02/14/20:	19 ⁽⁵⁾	02/08/2028	Common Stock	28,054	\$0.0000	28,054		D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Sonoco Products Company common stock.
- 2. The restricted stock units vest beginning one year from date of grant in three annual installments of 33%, 33% and 34%.
- 3. The restricted stock units vest on 3/24/2013. Vested shares will be paid to the reporting person six months following retirement or termination of service.
- 4. Each share of Restricted Stock Unit is the equivalent of one share of Sonoco Products Company common stock. The shares were cashed out to account for withholding taxes.
- 5. SAR units vest beginning one year from date of grant in three annual installments of 33%, 33% and 34%.

By: Elizabeth R. Kremer 02/16/2018 Power of Attorney for Vicki B. Arthur

** 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.