FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

on, D.C. 20549 OMB APPROVAL

ı	ONID ALL INOVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

1. Name and Address of Reporting Person* SCHRUM ROGER P					2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) ONE NO	ast) (First) (Middle) NE NORTH SECOND ST						3. Date of Earliest Transaction (Month/Day/Year) 12/08/2017							X Officer (give title Other (specify below) VP Invstr Rel & Corp Affairs				
P O BOX 160						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street) HARTSVILLE SC 29551-0160					(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.							Line	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	y) (State) (Zip)																	
		Tabl	e I - Non-I	Derivativ	re Se	curities	s Ac	quired, Di	spos	sed o	f, or Be	neficial	ly Owned	l				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Transaction Dispose Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		Beneficia Owned F	s ally following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code V	An	nount	(A) or (D) Price		Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)		
	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)	3A. Deemed Execution Dar if any (Month/Day/Y	Cod	saction e (Instr			6. Date Exerc Expiration D (Month/Day/\)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Over State of State	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares						
Dividend Equivalents on Restricted Stock Units	\$0.0000(1)	12/08/2017		A		117.1		(2)	(2	2)	Common Stock	117.1	\$54.67	3,863.	.4	D		
Phantom Stock Units	\$0.0000(3)	12/08/2017		A		108.9		(4)	(4	4)	Common	108.9	\$54.67	15,366	5.6	D		

Explanation of Responses:

- 1. Each share of Dividend equivalents on Restricted Stock units is the economic equivalent of one share of Sonoco Products Company common stock
- 2. Acquired quarterly dividend equivalent rights on Restricted Stock which will be settled upon the reporting person's retirement or other termination of service.
- 3. Each share of phantom stock is the economic equivalent of one share of Sonoco Products Company common stock.
- 4. Acquired on quarterly dividend on Sonoco Products Company's officers' deferred compensation plan and will be settled upon the reporting person's retirement or other termination of service.

By: Elizabeth R. Kremer Power of Attorney for Roger P. 12/12/2017
Schrum

** 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.