Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	ON

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

OMB APPROVAL										
OMB Number: 3235-0287										
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hours per response:	0.5									

1. Name and Address of Reporting Person* ARTHUR VICKI B					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						
	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/08/2018									below)	Officer (give title below) SVP Plastic		below)		
P O BOX 160						If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) HARTSVILLE SC 29551-0160				50										Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (2	Zip)			. 3.35.														
		Tabl	e I - Nor	n-Deriv	ative	Sec	uritie	s Ac	quired, D	isp	osed c	f, or B	enefic	ially	/ Owned	I				
Date						2A. Deemed Execution Date, if any (Month/Day/Year)			Code (In:	Transaction Disposed Of (D) (Instr. Code (Instr. 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	,	Amount	(A) (D)	or Pri	се	Transact	eported ransaction(s) nstr. 3 and 4)			(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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Der			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	ve es ially ng d tion(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Share	oer						
Dividend Equivalents on Restricted Stock Units	\$0.0000 ⁽¹⁾	06/08/2018			A		55.8		(2)		(2)	Common Stock	55.	8	\$53.19	850.8	3	D		
Phantom Stock Units	\$0.0000 ⁽³⁾	06/08/2018			A		22.5		(4)		(4)	Common	22.	5	\$53.19	2,944.	.7	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 Vicki B. 06/12/2018 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.