FORM	4
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549												OMB APPROVAL			/AL				
Section 2	is box if no lon 16. Form 4 or F ns may continu on 1(b).	d pursi	A pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
1. Name and Address of Reporting Person [*] Puechl Robert L. (Last) (First) (Middle)					2. Iss <u>SO</u> 3. Da	2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON] 3. Date of Earliest Transaction (Month/Day/Year)									5. Relationship of R (Check all applicable) Director X Officer (give) below)		ive title		er mer pecify
P O BOX	ONE NORTH SECOND ST P O BOX 160 Street						02/14/2018 4. If Amendment, Date of Original Filed (Month/Day/Year)									VP Global Flexible Pk			licable
(Street) HARTSV			9551-016	0									iled by One Reporting Person iled by More than One Reporting 1						
(City)	(Sta		^{zip)} le I - Nor	n-Deriv	ative	Sec	curities	s Ace	quired,	Dis	oosed of	, or	Bene	ficially	/ Owned				
1. Title of Security (Instr. 3) Date (Month/E			Execution D ay/Year) if any		cution Date,		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		(A) or 3, 4 and	4 and Securities Beneficial Owned Fol		Form	Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
		Т									osed of, o onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exe (Month/Day/Year) if ar	if any	ecution Date,		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
														Amount or Number					

Date Exercisable

02/14/2019⁽²⁾

(3)

(3)

02/14/2019⁽⁵⁾ 02/08/2028

Expiration Date

02/14/2028

(3)

(3)

Title

Common

Stock

Common

Stock

Common

Stock

Common

Stock

Explanation of Responses:

\$0.0000⁽¹⁾

\$0.0000⁽¹⁾

\$0.0000⁽¹⁾

\$50.83

02/14/2018

02/14/2018

02/14/2018

02/14/2018

Restricted

Stock Units

Restricted Stock Units II

Restricted

Stock Units II

Appreciation Right

Stock

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 2/09/2015. Vested shares will be paid to the reporting person six months following retirement or termination of service.

Code V

A

A

F

A

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.

(A)

785

228

5,726

(D)

q(4)

5. SAR units vest beginning one year from date of grant in three annual installments of 33%, 33% and 34%.

By: Elizabeth R. Kremer -

of Shares

785

228

9

5,726

\$0.0000

\$0.0000

\$50.83

\$0.0000

785

1,081

1.072

5,726

D

D

D

D

Power of Attorney for Robert L. 02/16/2018

<u>Puechl</u>

** 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.