FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPRO	JVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
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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* DELOACH HARRIS E JR						2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) ONE NORTH SECOND ST					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2017										71		er (give title		r (specify			
P O BOX 160 (Street) HARTSVILLE SC 29551-0160					50	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		(State)	(2	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
D					2A. Deemed Execution Date, if any (Month/Day/Year)		Transa Code	3. Transaction Code (Instr. 8)					4 and Securi Benefi Owned		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount		(A) or (D)	Pric	e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock			02/17/2017		7			A		1,376	1,376		\$	\$52.7 56		5,889.9	D					
Common Stock				02/17	02/17/2017				F		546		D	\$	\$52.7		5,343.9	D				
Common Stock														5,604.4		04.4122	I	by 401k (plan)				
Common Stock																-	1,848	I	by Keogh Pension			
Common Stock																12,365		I	By Spouse			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
			Transa Code (saction of E			Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)					
Code V		(A)	(D)	Date Exercisa		Expiration Date	Titl	of	ımber													

Explanation of Responses:

By: Elizabeth R. Kremer -

Power of Attorney for Harris 02/22/2017

E. DeLoach Jr.

** Signature of Reporting Person Date

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

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.

^{*} 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).