FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
1	Estimated average burden									

0.5

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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*  Thompson Marcy J					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					
(Last) (First) (Middle) ONE NORTH SECOND ST P O BOX 160					3. Date of Earliest Transaction (Month/Day/Year) 02/08/2019							X Officer (give title Other (specify below) below)  VP, Marketing&Innovations					
(Street) HARTSVILLE SC 29551-0160  (City) (State) (Zip)			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(Oily)			ole I - Non-D	erivativ	/e Se	curit	ies A	.cauired. I	Dispos	sed of	or Ben	eficially	v Owned				
1. Title of Security (Instr. 3) 2. Transa Date			Fransactio	action 2A. Deemed Execution Date,		3. Transac Code (Ir	4. Securities Acquired (A		d (A) or	5. Amour Securitie Beneficia Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	et li ect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	V An	mount	(A) or (D) Price			nsaction(s) hsaction(s) etr. 3 and 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 Date, if any (Month/Day/Year	4. Transa Code r) 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	: t (D) direct	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expirat Date	ıtion	Title	Amount or Number of Shares					
Restricted Stock Units	\$0.0000(1)	02/08/2019		F			32 <sup>(2)</sup>	02/08/2018	02/08/2	2027 <sup>(3)</sup>	Common Stock	32	\$58.7	785		)	
Restricted Stock Units	\$0.0000(1)	02/10/2019		F			51 <sup>(2)</sup>	02/10/2017	02/10/2	2027 <sup>(3)</sup>	Common Stock	51	\$58.7	1,183		)	

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of Sonoco Products Company common stock.
- 2. 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.
- 3. The restricted stock units vest 33%, 33%, 34% per year beginning one year from date of grant. Vested shares will be paid to the reporting person six months following retirement or termination of service.

By:Elizabeth R. Kremer -Power of Attorney for Marcy J. 02/12/2019 Thompson

\*\* 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.