## FORM 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

shington, D.C. 20549		
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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).
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## **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average	burden								
hours per response	: 1.0								

Form 3 Holdings Reported.

Filed pursuant to Section 16(a) of the Securities Evolution Act of 1034

Form 4	1 Transactions	Reported.	Tilec	or Section 3													
1. Name and Address of Reporting Person*  Haley John R				2. Issuer Name <b>and</b> Ticker or Trading Symbol SONOCO PRODUCTS CO [ SON ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u> </u>	<del>JOHN IX</del>												X Direc	tor		10%	Owner
(Last)	(F ORTH SEC	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020							Officer (give title Other (specify below) below)								
P O BOX	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)										
(Street)													,	filed by C	ne Re	porting Pe	erson
HARTS	VILLE SO	C 2	29551-0160										Form Perso	i filed by M	fore the	an One R	eporting
(City)	(S	tate) (	Zip)														
		Table	l - Non-Deriva	ative Secu	rities	s Acc	quire	ed, Dis	posed	of, o	r Bene	ficia	illy Own	ed			
D		2. Transaction Date (Month/Day/Year)	Execution Date, if any		Code (Instr.		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)				osed	osed 5. Amount of Securities Beneficially Owned at end of		Ownership		7. Nature of Indirect Beneficial Ownership	
							Amount (		(A) or (D)	Price	Price		Issuer's Fiscal Year (Instr. 3 and 4)			(Instr. 4)	
		12/18/2020					7,6	580	A	\$0.0	0000	180	),428	I		By Spouse	
Common	Stock												15	,115		D	
		Та	ble II - Derivat (e.g., pı	ive Securi uts, calls, v										d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year) if any	Execution Date,	4. Transaction Code (Instr. 8)			Expiration Date (Month/Day/Year)			Ar Se Ur De Se	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficia Ownersh ct (Instr. 4)
					(A)	(D)	Date Exer	e rcisable	Expiration Date		Amo or Num of tle Shai	ber					

**Explanation of Responses:** 

By: Elizabeth R. Kremer -Power of Attorney for John R. 01/28/2021 <u>Haley</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.