| SEC Form | 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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:

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| | hours per response: | 0.5 |

| (2000) | | n* | 2. Issuer Name and Ticker or Trading Symbol <u>SONOCO PRODUCTS CO</u> [SON] | | tionship of Reporting Perso all applicable) Director Officer (give title | on(s) to Issuer 10% Owner Other (specify | |
|----------------------------------|---------------|---------------------|---|------------------------|---|--|--|
| | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2020 | | below) VP/Strategy & Corp D | below) | |
| (Street) HARTSVILLE (City) | SC (State) | 29551-0160 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing (Form filed by One Repor Form filed by More than (Person | ting Person | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (| | 4. Securities A Disposed Of (5) | | | 5. Amount of Securities Beneficially Owned Following (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|--------|---|--|--|--|---|------------|---|
| | | | Code | v | Amount (A) or (D) Price | | Reported Transaction(s) (Instr. 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) | 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 (8) | | 5. Num of Deriva Securi Acquir (A) or | tive ties red | Expiration Date (Month/Day/Year) | | Expiration Date (Month/Day/Year) Amount of Securitie: Underlyin Derivative | | Expiration Date (Month/Day/Year) Amount of Securities Derivative Securities Contraction Underlying Derivative Security Instr. 5) Beneficially Downed | | Amount of Securities Underlying Derivative Security | | Amount of Securities Underlying Derivative Security | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|---------------------|-------------------------------------|--------------------|---|------------------------|--|--|--|--|--|--|--|--|
| | | | | | | Dispos of (D) (Instr. and 5) | 3, 4 | | | Amount or | | | Reported Transaction(s) (Instr. 4) | | | | | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Number of Shares | | | | | | | | |
| Restricted Stock Units | \$0.0000 ⁽¹⁾ | 02/12/2020 | | A | | 1,232 | | 02/12/2020 ⁽²⁾ | 02/12/2035 | Common Stock | 1,232 | \$0.0000 | 1,232 | D | | | | | |

Explanation of Responses:

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%.

By: Elizabeth R. Kremer -Power of Attorney for Robert **Dillard**

** Signature of Reporting Person Date

02/14/2020

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.