FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to 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
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| | | | of Section So(n) of the investment Company Act of 1940 | | | | |
|---|---------------------|---------------------|---|------------------------|--|---|--|
| 1. Name and Address of Reporting Person [*] Saunders Barry L | | | 2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON] | | ionship of Reporting Per all applicable) Director Officer (give title | son(s) to Issuer 10% Owner Other (specify | |
| (Last) ONE NORTH SI P O BOX 160 | (First) ECOND ST | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 07/29/2016 | | below) Sr VP, CF | 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 (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting 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) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (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) |
| Common Stock | 07/29/2016 | | М | | 40,000 | Α | \$41.58 | 64,444 | D | |
| Common Stock | 07/29/2016 | | S | | 3,809 | D | \$ 51.0922 ⁽¹⁾ | 60,635 | D | |
| Common Stock | 07/29/2016 | | D | | 36,191 | D | \$51.12 | 24,444 | D | |
| Common Stock | | | | | | | | 638.3266 | I | by 401k plan |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1 | | | (e.g., | puts, | calls | , wa | rrants | , options, | convertio | le secul | ities) | | | | |
|---|---|--|---|------------------------------|-------|--|--|--|--------------------|----------------------|---|----------|--|--|--|
| 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) | | of Deri Sec Acq (A) Disp of (I | umber ivative urities juired or cosed D) (Instr. and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) Derivative Securit (Instr. 3 and 4) | | ies g Security | 8. Price of Derivative Security (Instr. 5) Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Appreciation Right | \$41.58 | 07/29/2016 | | М | | | 40,000 | 02/12/2015 | 02/12/2021 | Common Stock | 40,000 | \$0.0000 | 21,450 | D | |

Explanation of Responses:

1. The 51.09221 is an average price, shares sold between 51.09 and 51.1114

By: Elizabeth R. Kremer -

Power of Attorney for Barry L. 08/01/2016 Saunders

** 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.