FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

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* Fuller Rodger D					2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]							(Che	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) 02/13/2023							2	X Officer (give title Other (specify below) Chief Operating Officer					
(Street) HARTSV			29551-0160 (Zip)		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						
1. Title of Security (Instr. 3) 2. Transar Date				2. Transaction	2A. Deemed Execution Date,			quired, Disposed of, or Benefic 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 5)			i (A) or	5. Amour Securitie Beneficia Owned F	s illy ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
				Code V				Am	ount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(lr	(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		3A. Deemed Execution Da if any (Month/Day/Y	4. te, Transaction Code (Instr				6. Date Exercisa Expiration Date (Month/Day/Year		e of Securities		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Owne Form: Direct or Ind (I) (Ins	(D)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares		Transactio (Instr. 4)	n(s)			
Restricted Stock Units	\$ 0.0000 ⁽¹⁾	02/13/2023		A		14,078		02/13/2024	(2	2)	Common Stock	14,078	\$0.0000	14,078	Г			
Restricted Stock Units II	\$0.0000(1)	02/13/2023		A		686		(3)	(4	4)	Common Stock	686	\$0.0000	2,087	Г			
Restricted Stock Units II	\$0.0000(1)	02/13/2023		F			69 ⁽⁵⁾	(3)	(4	4)	Common Stock	69	\$60.57	2,018	Г			

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%.
- 3. The restricted stock units vest immediately and deferred. Vested shares will be paid to the reporting person six months following retirement or termination of service.
- 4. Vested shares will be paid to the reporting person six months following retirement or termination of service.
- 5. 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.

By: Elizabeth R. Kremer -

Power of Attorney for Rodger 02/15/2023

D. Fuller

** 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.