FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-02

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Γ	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	hours per response:	0.5				

1. Name and Address of Reporting Person*  McLeland Allan H						2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [ SON ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director     10% Owner					
(Last) ONE NO	ORTH SEC	(First) (Middle)					of Earli 2018	est Trar	nsaction (M	1onth	/Day/Year)		helow)			below)	(specify )			
(Street) HARTSVILLE SC 29551-0160					_   4. I										Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securit Transaction Code (Instr.		of, or Beneficia ities Acquired (A) or d Of (D) (Instr. 3, 4 an		5. Amou Securitie Benefici	int of	Form (D) or	: Direct   c	7. Nature of Indirect Beneficial Ownership			
						(		Code	v	Amount	ount (A) or (D)		Reporte Transac (Instr. 3	d tion(s)			(Instr. 4)			
Common Stock			02/08	3/2018	3		М		818	A	\$0.000	00 17,51	3.3792	792 D						
Common Stock			02/08	02/08/2018				F		300	D	\$50.2	2 17,21	7,213.3792		D				
Common Stock			02/10	02/10/2018				M		1,221	A	\$0.000	00 18,43	,434.3792		D				
Common Stock			02/10	02/10/2018				F		448	D	\$49.9	5 17,98	17,986.3792		D				
Common Stock			02/11	02/11/2018				M		1,004	A	\$0.000	00 18,99	18,990.3792		D				
Common Stock			02/11	1/2018				F		288	D	\$49.9	5 18,70	18,702.3792		D				
Common	Stock												3.7147				oy 401k olan			
		-	Гable II -								osed of, convertil			Owned		<u>'                                    </u>				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution		4. Transaction Code (Instr. 8)		5. Number 6		6. Date Exercis Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	d f g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ully	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares							
Restricted Stock Units	\$0.0000(1)	02/08/2018			M			818	02/08/20	18	02/08/2027	Common Stock	818	\$50.2	1,662	2	D			
Restricted Stock Units	\$0.0000(1)	02/10/2018			M			1,221	02/10/20	17	02/10/2027	Common Stock	1,221	\$49.95	1,258	3	D			
Restricted Stock	\$0.0000(1)	02/11/2018			M			1,004	02/11/201	6 <sup>(2)</sup>	02/11/2025	Common Stock	1,004	\$49.95	0.000	0	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 33%, 33% and 34% per year from date of grant.

By:Elizabeth R. Kremer -Power of Attorney for Allan H. 02/12/2018 **McLeland** 

\*\* 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.