FORM 4

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

| Washington,  | D.C. | 20549 |
|--------------|------|-------|
| vvasimigton, | D.O. | 200-0 |

| STATEMENT | OF CHANGES | S IN BENEFICIAL | <b>OWNERSHIP</b> |
|-----------|------------|-----------------|------------------|

| OMB APPROVAL                                    |           |  |  |  |  |  |  |  |  |  |  |
|---|-----------|--|--|--|--|--|--|--|--|--|--|
|   |           |  |  |  |  |  |  |  |  |  |  |
| OMB Number:                                     | 3235-0287 |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden hours per response: 0. |           |  |  |  |  |  |  |  |  |  |  |
| 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

| Name and Address of Reporting Person*     WHIDDON THOMAS E |   |  |  |  | SO  | 2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [ SON ] |                                     |  |   |   |                   |                 |   |  | ck all appli                            | cable)   | Reporting Person(s) to Issuer<br>ole)<br>10% Owner                 |   |  |
|--|---|--|--|--|---|--|-------------------------------------|--|---|---|-------------------|-----------------|---|--|---|--|--|---|--|
| (Last)   | `   | ,  | (Middle)                                     |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023            |                                     |  |   |   |                   |                 |   | Officer<br>below)  | (give title                             |  | Other (specify below)  |   |  |
| ONE NORTH SECOND ST<br>P O BOX 160                         |   |  |  |  | 4. If A   | 4. If Amendment, Date of Original Filed (Month/Day/Year)               |                                     |  |   |   |                   | Line)           | . Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person |  |   |  |  |   |  |
| (Street) HARTSVILLE SC 29551-0160                          |   |  | Du   | Form filed by More than One Reporting Person |   |  |                                     |  |   |   |                   |                 |   | rting  |   |  |  |   |  |
| (City)   | (S  | tate) (                                    | (Zip)  |  | Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |  |                                     |  |   |   |                   |                 | ed to   |  |   |  |  |   |  |
|  |   | Table                                      | e I - Nor                                    | า-Deriv                                      | ative \$  | Sec  | urities                             | s Ac   | quired, D                                       | isp   | osed (            | of, or B        | enef  | ficiall  | y Owne                                  | d  |  |   |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |   |  |  |  | Execution Date,   |  | Transaction Dispose Code (Instr. 5) |  | rities Acquired (A) c<br>ed Of (D) (Instr. 3, 4 |   | A) or<br>3, 4 and |                 | ies For<br>cially (D)<br>Following (I) (  |  | rm: Direct<br>or Indirect<br>(Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                      |  |   |  |
|  |   |  |  |  |   | Code V Amount (A) or (D)   |                                     |  | Price   | Reported Transaction(s) (Instr. 3 and 4)  |                   |                 |   | Instr. 4)  |   |  |  |   |  |
|  |   | Ta   |  |  |   |  |                                     |  | uired, Dis<br>, options                         |   |                   |                 |   |  | Owned                                   |  |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Executior<br>if any<br>(Month/Da | n Date,                                      |   | Transaction of Code (Instr. Derivative                                 |                                     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Securit<br>(Instr. 3 and 4) |                   | urity           | B. Price of<br>Derivative<br>Gecurity<br>Instr. 5)  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | y   1                                   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |
|  |   |  |  |  | Code  | v  | (A)                                 | (D)  | Date<br>Exercisable                             | Ex <sub> </sub>   | piration<br>te    | Title           | or<br>Nur<br>of   | ount<br>mber<br>ares   |   |  |  |   |  |
| Phantom<br>Stock<br>Units                                  | (1)   | 06/09/2023                                 |  |  | A   |  | 425.7                               |  | (2)   |   | (2)               | Commor<br>Stock | 42  | 25.7   | \$62.94                                 | 52,970.5   | 5  | D |  |

## **Explanation of Responses:**

- 1. Each share of phantom stock is the economic equivalent of one share of Sonoco Products Company common stock.
- 2. Acquired on quarterly dividend on Sonoco Products Company's directors' deferred compensation plan and will be settled upon the reporting person's retirement or other termination of service.

<u>By: Elizabeth R. Kremer -</u> <u>Power of Attorney for Thomas</u> <u>06/13/2023</u>

E. Whiddon

\*\* 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.