FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549	
rvasiliigion,	D.C.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Florence John M			2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) ONE NO	(Fir	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/08/2023								X Officer (give title Other (specification) VP, Gnl Council, Secy, CHRO					
P O BOX 160					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) HARTSV	ILLE SC	2	9551-0160			X Form filed by One Reporting Person Form filed by More than One Reportin Person												
(City) (State) (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													
									defense condi						on or written	pian tr	nat is intended	to
		Tabl	e I - Non-l			_			quired, Di	<u> </u>				y Owned	l			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				ay/Year) Execut		. Deemed ecution Date, iny onth/Day/Year)		Code (Ins	Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amou Securitie Beneficia Owned F Reported	es ally following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	А	Amount	(A) or (D)	Price	Transact (Instr. 3 a	tion(s)			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 Da if any (Month/Day/\(^1\)	ate, T	4. 5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative (Instr. 3 and			f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V (A) (D) Exercisable Expiration Date Title Shares														
Dividend Equivalents on Restricted Stock Units	\$0.0000(1)	12/08/2023			A		142.6		(2)		(2)	Common Stock	142.6	\$54.49	1,696.	4	D	

Explanation of Responses:

- 1. Each share of Dividend equivalents on Restricted Stock units is the economic equivalent of one share of Sonoco Products Company common stock
- 2. Acquired quarterly dividend equivalent rights on Restricted Stock which will be settled upon the reporting person's retirement or other termination of service.

By:Elizabeth R Kremer -

Power of Attorney for John M. 12/12/2023

Florence

** 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.