FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| 1 | 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).

## 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 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer 1. Name and Address of Reporting Person\* (Check all applicable) SONOCO PRODUCTS CO [ SON ] **BOWEN JIM C** Director Officer (give title Other (specify X 3. Date of Earliest Transaction (Month/Day/Year) below) below) (Last) (First) (Middle) 08/31/2004 SR. VP-GLOBAL PAPER OPERATIONS ONE NORTH SECOND STREET 6. Individual or Joint/Group Filing (Check Applicable 4. If Amendment, Date of Original Filed (Month/Day/Year) (Street) Line) HARTSVILLE 29550 X Form filed by One Reporting Person SC Form filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) 2. Transaction 1. Title of Security (Instr. 3) 2A. Deemed 5. Amount of 7. Nature of Securities Beneficially Indirect Beneficial Execution Date Transaction if any (Month/Day/Year) Code (Instr (Month/Day/Year) Owned Following Ownership Reported (Instr. 4) (A) or (D) Transaction(s) Code Price Amount (Instr. 3 and 4) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

|   | (e.g., puts, calls, warrants, options, convertible securities)        |  |   |                              |   |         |     |  |                    |   |                                     |   |  |  |  |
|---|---|--|---|------------------------------|---|---------|-----|--|--------------------|---|-------------------------------------|---|--|--|--|
| 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. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   |         |     | Expiration Date (Month/Day/Year) (A) ed ttr. |                    | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                                     | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | 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                          | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |   | Transaction(s)<br>(Instr. 4)   |  |  |
| Phantom<br>Stock<br>Units                           | (1)   | 08/31/2004                                 |   | A                            |   | 45.6704 |     | (2)  | (2)                | Common<br>Stock   | 45.6704                             | \$25.91   | 2,957.4102   | D  |  |

## **Explanation of Responses:**

- 1. 1-for-1
- 2. The reported phantom stock units were acquired under Sonoco Products Company's excess benefit plan and will be settled upon the reporting person's retirement or other termination of service.

By: George S. Hartley - Power of Attorney For: Jimmy C.

**Bowen** 

\*\* Signature of Reporting Person

Date

09/01/2004

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.