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SONOCO PRODUCTS CO
Form 5
January 26, 2009

HARTSVILLE, SCÂ 29550

OMB APPROVAL FORM 5 OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL** Form 4 or Form burden hours per **OWNERSHIP OF SECURITIES** 5 obligations response ... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported

1. Name and Address of Reporting Person [*]	2. Issuer Name and Ticker or Trading	5. Relationship of Reporting Person(s) to			
FORT CALEB C	Symbol	Issuer			
	SONOCO PRODUCTS CO [SON]	(Check all applicable)			
(Last) (First) (Middle)	3. Statement for Issuer's Fiscal Year Ended				
	(Month/Day/Year)	X Director 10% Owner			
	12/31/2008	Officer (give title Other (specify			
ONE NORTH SECOND STREET		below) below)			
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Reporting			
	Filed(Month/Day/Year)				

(check applicable line)

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

(City)	(State) (Zip) Tabl	e I - Non-Deri	vative See	curitie	s Acqu	ired, Disposed o	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3, Amount	d (A) of d of (E 4 and (A) or))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/10/2008	Â	G	2,000	D	\$0	264,619	D	Â
Common Stock	12/16/2008	Â	G	1,004	А	\$0	265,623	D	Â
Common Stock	12/16/2008	Â	G	1,004	А	\$0	15,840	Ι	by Daughter
Common Stock	12/16/2008	Â	G	1,004	А	\$0	16,777	Ι	by Son
	12/16/2008	Â	G	1,004	А	\$0	12,006	Ι	by Spouse

Common Stock

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transaction	5. Number	6. Date Exerce Expiration D		7. Titl Amou		8. Price of Derivative	
	Conversion	(Wolith/Day/Tear)	Execution Date, II			*					of
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Under	lying	Security	D
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Se
	Derivative				Securities			(Instr.	3 and 4)		B
	Security				Acquired						0
					(A) or						E
					Disposed						Is
					of (D)						Fi
					(Instr. 3,						(I
					4, and 5)						
									Amount		
						Date Expiratio			or		
							-	Title	Number		
						Exercisable	Date		of		

	Energiashia	Data	Title	Numbe
	Exercisable	Date		of
(A) (D)				Shares

Reporting Owners

Reporting Owner Name / Address		Relationsh				
	Director	10% Owner	Officer	Other		
FORT CALEB C ONE NORTH SECOND STREET HARTSVILLE, SC 29550	ÂX	Â	Â	Â		
Signatures						
By: George S. Hartley - Power of Attorney For: Caleb C. Fort 01/26/20						
***************************************		D :				

**Signature of Reporting Person

Date

Explanation of Responses:

* 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 provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.