FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPRO | JVAL | | | | |
|--------------------------|-----------|--|--|--|--|
| 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 OF SECURITIES

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

| (Print or Typ | e Responses |) | | | | | | | | | | | | | | | |
|---|---|--|---|--|----------|---------------|---------------------|---|---|--|---|--|--|--------------|---|--|-----------|
| 1. Name and Address of Reporting Person * OTIS CLARENCE JR | | | | 2. Issuer Name and Ticker or Trading Symbol V F CORP [VFC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner | | | | | |
| 105 CORPORATE CENTER BLVD (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/09/2007 | | | | | | | | (| Officer (give | title below) | Othe | r (specify below) | |
| (Street) GREENSBORO, NC 27408 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. 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-Derivative Securities Acqu | | | | | | | s Acqui | ired, Disposed of, or Beneficially Owned | | | | | |
| (Instr. 3) Dat | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | | Date, if | Code (Inst | | 4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5) (A) or Amount (D) Pr | | f (D) | Owned Follow Transaction(s) (Instr. 3 and 4) | | Securities Beneficially ying Reported | | Ownership of Born: Born: Oriect (D) | Nature Indirect eneficial wnership nstr. 4) | |
| Reminder: F | Report on a se | eparate line for each | | · Derivat | ive S | Securitio | es Ac | Perso in this a curi quired, Dis | ns was form | who respond m are not re y valid OMB | quired contr | l to re ol nu | espond (mber. | | | | 74 (9-02) |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Security or Exercise (Month/Day/Year | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. 5. N f Transaction of Code Deri r) (Instr. 8) Sect Acq (A) Disp of (I (Instr. 8) | | 5. Nun | tive ties red | 6. Date Ex Expiration | , options, convertible securi 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | ng | | 9. Number o Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form of Derivative Security: Direct (D) or Indirect | Beneficia |
| | | | | Code | V | (A) | (D) | Date Exercisable | | Expiration Date | Title | | Amount or Number of Shares | | | | |
| 2007 Non- Qualified Stock Option (right to buy) | \$ 76.10 | 02/09/2007 | | A | | 5,800 | | 02/09/20 | 08 (| 02/08/2017 | Com | | 5,800 | \$ 0 | 5,800 | D | |
| Repor | ting O | wners | | | | | | | | | | | | | | | |
| Relationships | | | | | | | | | | | | | | | | | |

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| OTIS CLARENCE JR 105 CORPORATE CENTER BLVD GREENSBORO, NC 27408 | X | | | | | |

Signatures

| Mark R. Townsend for Clarence Otis, Jr. (Pursuant to Signing Authority on File) | 02/12/2007 | |
|---|------------|--|
| **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 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.