FORM 4

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

| OMB APPRO | OVAL |
|---------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average b | urden |
| 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 Type R | (esponses) | | | | | | | | | | | | | | |
|---|-------------|--|----------------------------------|---|--------------------------------|-----------|-----|--|---|---|--|------------|---|--|---------------------|
| 1. Name and Address of Reporting Person *- PICKARD FRANK C III | | | | 2. Issuer Name and Ticker or Trading Symbol V F CORP [VFC] | | | | | | 5. | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) Other (specify below) VP and Treasurer | | | | |
| (Last) (First) (Middle) 105 CORPORATE CENTER BLVD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2009 | | | | | | | | | | | |
| (Street) | | | | 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 | | | | |
| GREENSBORO, NC 27408 (City) (State) (Zip) | | | (Zip) | Table I - Non-Derivative Securities Acou | | | | | | s Acquire | ured, Disposed of, or Beneficially Owned | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year | | 2A. Deemed Execution Date, i r) any (Month/Day/Year | | l 3. Date, if C | 3. Transaction Code (Instr. 8) | | | | 5. Amount of Securities Bo Owned Following Reporte Transaction(s) (Instr. 3 and 4) | | neficially | 6. | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Reminder: Repo | ort on a se | parate line for each | Table II - | Derivati | ve S | ecurities | Acq | Persons in this fo displays uired, Dispos | s who responderm are not rest a currently vertible security. | equired to alid OMI | o respond (B control n | unless the | | ed SEC | 1474 (9-02) |
| Security (Instr. 3) Pri | onversion | e (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transaction Code (Instr. 8) | | 5. Number | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s | Owners Form of Derivati Security Direct (or Indire | Ownershi (Instr. 4) |
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | (Instr. 4 | |
| 2009 Non- Qualified Stock Option (right to buy) | 53.60 | 02/13/2009 | | A | | 14,800 | | (1) | 02/12/2019 | Commo Stock | 114 800 | \$ 0 | 14,800 | D | |
| Reportir | ng Ov | vners | | | | | | | | | | | | | |

| | Relationships | | | | | |
|--|-------------------------------|--|------------------|-------|--|--|
| Reporting Owner Name / Address | Director 10% Owner Officer | | Officer | Other | | |
| PICKARD FRANK C III 105 CORPORATE CENTER BLVD GREENSBORO, NC 27408 | | | VP and Treasurer | | | |

Signatures

| Mark R. Townsend for Frank C. Pickard III (Pursuant to Signing Authority on File) | 02/17/2009 |
|---|------------|
| **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).

(1) This option vests as follows: 4,934 shares vest on 02/13/2010; 4,933 shares vest on 02/13/2011; and 4,933 shares vest on 02/13/2012.

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.