## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 Ty   | pe Response   | s)                                       |                            |   |     |                                      |              |  |                 |                          |   |   |  |                                     |  |
|--|---|--|----------------------------|---|-----|--------------------------------------|--------------|--|-----------------|--------------------------|---|---|--|-------------------------------------|--|
| 1. Name ar<br>Salzburg   | 2. Issuer Name and Ticker or Trading Symbol V F CORP [VFC]            |  |                            |   |     |                                      |              | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |                 |                          |   |   |  |                                     |  |
| (Last) (First) (Middle) 105 CORPORATE CENTER BLVD                          |   |  |                            | 3. Date of Earliest Transaction (Month/Day/Year) 02/11/2013 |     |                                      |              |  |                 |                          | X Officer (give title below) Other (specify below)  VP & President-International  |   |  |                                     |  |
| (Street) GREENSBORO, NC 27408  |   |  |                            | 4. If Amendment, Date Original Filed(Month/Day/Year)        |     |                                      |              |  |                 |                          | 6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person |   |  |                                     |  |
| (City  |   | (State)                                  | (Zip)                      |   | Tr. | 11 T N                               |              | •  | ,.              |                          | D.  | 1.6.1   |  | 0 1                                 |  |
| 1.Title of Security 2. Tran (Instr. 3) Date                                |   |  | . Transaction              | 2A. Deemed<br>Execution Date, if                            |     | 3. Transaction<br>Code<br>(Instr. 8) |              | 4. Securities Acquired   |                 |                          | Beneficially Owned Following<br>Reported Transaction(s)   |   |  | 6.<br>Ownership<br>Form:            | 7. Nature<br>of Indirect<br>Beneficial |
|  |   |  | Code                       |   |     | V                                    | Amoun        | (A) or (D)   | Price           |                          | Instr. 3 and 4)   |   | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4)                       | Ownership<br>(Instr. 4)             |  |
| Common   | Stock   |  | 2/11/2013                  |   |     | A                                    |              | 17,061   | _               | \$ 0                     | 88,061  |   |  | D                                   |  |
| Common Stock 02/11/  |   |  | 2/11/2013                  |   |     | A                                    |              | 15,000   | ) A             | \$ 0                     | 103,061   |   |  | D                                   |  |
| 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/Yea | 3A. Deemed<br>Execution Da | 4.<br>Transaction<br>Code<br>Year) (Instr. 8)               |     | 5.                                   | 6. D         | ions, convertible se<br>6. Date Exercisable<br>and Expiration Date<br>(Month/Day/Year)     |                 | 7. T<br>Am<br>Und<br>Sec |   | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Ownersh<br>Form of<br>Derivati<br>Security<br>Direct (I<br>or Indire | Ownershi<br>(Instr. 4)<br>D)<br>ect |  |
|  |   |  |                            | Code  |     | (A) (D)                              | Date<br>Exer |  | Expiration Date | On Titl                  | Amount or Number of Shares  |   |  |                                     |  |
| Repor  | ting O  | wners                                    |                            | ,   |     | •                                    |              |  |                 | •                        |   |   |  |                                     |  |
|  |   |  |                            | Relationships   |     |                                      |              |  |                 |                          |   |   |  |                                     |  |
| Reporting Owner Name / Address   |   |  | Director                   | 10%<br>Owner Officer  |     |                                      |              | Other  |                 |                          |   |   |  |                                     |  |
| Salzburger Karl Heinz<br>105 CORPORATE CENTER BLVD<br>GREENSBORO, NC 27408 |   |  | VD                         |   | VP  | & Presid                             | ent-I        | nternat  | ional           |                          |   |   |  |                                     |  |

## **Signatures**

| Mark R. Townsend for Karl Heinz Salzburger (Pursuant to Signing Authority on File) | 02/13/2013 |
|--|------------|
| **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.