## FORM 4

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

OMB APPROVAL									
OMB Number:	3235-0287								
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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

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•	e Responses			2 Ioou	or M	omo e	nd Tio	lear or T	rodi	ing Sym	hal		5 Re	lationshin	of Renorting	Person(s) to	Issuer	
1. Name and Address of Reporting Person * GANNAWAY MICHAEL T				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) 08/01/2013									X	X Officer (give title below) Other (specify below)  VP-VF Direct/Customer Teams				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)									_X_ Fo	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 V Day of Co. 11								A	i i Di i i di Di Gi i i di					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year		3. Tr Code (Inst	ansactio			(A) 5. A Own Tran	c) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership				
							Co	ode	v	Amoun	(A) or (D)	Pri	ice	or (I)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		08/01/2013			N	M		4,400	A	\$ 53.	60 16,	966			D		
Common	Common Stock 08/01/2013						S		4,400 (2)	11)	\$ 201.0	0198 12,	566			D		
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Day/Year)  Price of Derivative Security		3A. Deemed Execution Date, if	(e.g., puts, calls,  4. 5. No f Transaction of Code Deri (Instr. 8) Secu Acqu (A) of Disp of (I			warra umber vative rities uired or osed	Acquired nts, opt 6. Date Expira	Expiration Date of V (Month/Day/Year) Sec		ially Owne	d Amount	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Security Direct ( or Indir	Ownershi (Instr. 4) D) ect			
				Code	V	and :	(D)	Date Exerci	isabl		Expiration Date	on ,	Title	Amount or Number of Shares				
2009 Non- Qualified Stock Option (right to buy)	\$ 53.60	08/01/2013		М			4,400	02/13	3/20	)10 <sup>(1)</sup>	02/12/2	2019	Commor Stock	4,400	\$ 0	8,900	D	
Repor	ting O	wners																

		Relationships							
Repor	porting Owner Name / Address		10% Owner	Officer	Other				
105 COR	WAY MICHAEL T PORATE CENTER BLVD BORO, NC 27408			VP-VF Direct/Customer Teams					

### **Signatures**

Mark R. Townsend for Michael T. Gannaway (Pursuant to Signing Authority on File)	08/02/2013
—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).
- $\textbf{(1)} \ \ This \ option \ vested \ as \ follows: 4,934 \ shares \ vested \ on \ 02/13/2010; \ 4,933 \ shares \ vested \ on \ 02/13/2011; \ 4,933 \ shares \ vested \ on \ 02/13/2012.$
- The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from not less than \$200.69 to not more than \$201.39. The reporting person (2) undertakes to provide to VF Corporation, any security holder of VF Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote to this Form 4.

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.