## FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-028
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hours per response	. 0.

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

1. Name and Address of Reporting Person * MCMULLEN W RODNEY			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						
(Last) (First) (Middle) 8505 E. ORCHARD ROAD				3. Date of Earliest Transaction (Month/Day/Year) 12/27/2019					_	Officer (give	title below)	Other	(specify below	)	
(Street) GREENWOOD VILLAGE, CO 80111			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						
(Cit	y)	(State)	(Zip)			Tab	le I - I	Non-Deriv	ative Secur	ties Acquire	ed, Disposed	of, or Benef	icially Owned		
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year	any	eemed ion Date, n/Day/Ye	if Cod (Ins	Fransac de str. 8)	(A (Ir	Securities A ) or Dispose astr. 3, 4 and (A) mount (D)	d of (D) O 5) Ti (In	Amount of So wned Followin ransaction(s) nstr. 3 and 4)		C F C o	orm: Indirect (	Beneficial Ownership
Reminder:	Report on a s	eparate line for each	class of securities b	eneficiall	y owned	directly		Persons					on contained		474 (9-02)
Reminder:	Report on a s	eparate line for each		- Derivat	tive Secu	rities A	cquir	Persons in this fo a curren	orm are not tly valid O	required to the required to the required to the requirement of the requirement of the requirement of the required to the requi	o respond u number.		on contained form display		474 (9-02)
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1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II  3A. Deemed Execution Date, if any	- Derivat (e.g., pu 4. Transact Code	tive Secu its, calls, 5. N ion Deri Secu Acqu (Inst	rities A warrar umber o vative urities uired (A posed of	cquirents, op	Persons in this for a current ed, Dispos otions, con 6. Date Ex and Expira	orm are not tly valid O sed of, or Be vertible sec ercisable tition Date ty/Year)	required to MB control  neficially Orunities)  7. Title and Underlying (Instr. 3 and	orespond unumber.  wned  d Amount of g Securities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	10. Ownersh Form of Derivativ Security: Direct (D or Indirect	11. Natur of Indire Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
MCMULLEN W RODNEY 8505 E. ORCHARD ROAD GREENWOOD VILLAGE, CO 80111	X				

#### **Signatures**

/s/ Mark R. Townsend for W Rodney McMullen (pursuant to signing authority on file)	12/30/2019
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).
- Represents phantom stock units ("PSUs") accrued under the VF Corporation Directors Deferred Savings Plan ("Plan"), to be settled 100% in cash upon the reporting person's retirement. The (1) number of PSUs acquired equals the amount of Directors' fees deferred by the reporting person divided by the fair market value (average of the high and low selling prices) per share on the date of deferral. The number of PSUs beneficially owned may vary over time due to deemed reinvestment of dividends.
- (2) 1 for 1
- (3) There is no date that should appear in these columns. These columns are not applicable to this particular filing.
- (4) Each PSU was acquired at the election of the Director by deferring \$99.995 of fees per PSU.

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 no	ot required to respond unless the form displays a currently valid OMB number.