Edgar Filing: V F CORP - Form 4

V F CORP												
Form 4												
February 15,	2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UNITE	D STATES					NGE (COMMISSION	ONID	3235-0287		
Check thi	s box		was	hington,	D.C. 203	549			Number:	January 31,		
if no long		TMENT O	F CHAN	CES IN F	RENEFI	CIA		NERSHIP OF	Expires:	2005		
subject to Section 10					GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per response 0.5		
Form 4 or				Sheek								
Form 5	Filed p	oursuant to	Section 16	6(a) of the	e Securiti	es Ez	cchang	ge Act of 1934,	100001100	0.0		
obligation	¹⁸ Section 1							f 1935 or Sectio	n			
may conti <i>See</i> Instru		30(h)	of the Inv	vestment (Company	y Act	of 19	40				
1(b).												
(Drint an Tana D												
(Print or Type R	(esponses)											
1. Name and A	ddress of Reportin	ng Person *	2 Issuer	Name and	Ticker or 7	Fradin	a	5. Relationship of	f Reporting Per	son(s) to		
Roe Scott A. Symbol				ssuer Name and Ticker or Trading				Issuer				
				RP [VFC]				(Charle all and include)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check					k all applicable)				
				Day/Year)				Director 10% Owner				
105 CORPORATE CENTER BLVD 02/13/20				•				Officer (give title Other (specify below)				
								· · · · · · · · · · · · · · · · · · ·	VP & CFO			
	(Street)		4. If Ame	ndment, Dat	e Original			6. Individual or J	oint/Group Fili	ng(Check		
				Month/Day/Year)				Applicable Line)				
				·				_X_ Form filed by				
GREENSBO	DRO, NC 2740	8						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tabl	L - Non-D	arivativa S	locuri	tios A c	quired, Disposed o	f or Bonoficia	lly Owned		
1 T:41 f	2 Turner etien I	Data 24 Da					its At			-		
1.Title of Security	2. Transaction I (Month/Day/Ye		on Date, if	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)			r	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	(110110112) uj / 10	any						Beneficially	(D) or	Beneficial		
		(Month/	(Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned	ndirect (I)	Ownership			
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common								1 120 250	т	her Transt (1)		
Stock								1,189.259	Ι	by Trust (1)		
Common												
Stock	02/13/2017			А	2,807	А	\$0	60,373	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: V F CORP - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day,	5. Date Exercisable and Expiration Date Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relatio						
1	Director	10% Owner	Officer	Other				
Roe Scott A. 105 CORPORATE CENTER BLVD GREENSBORO, NC 27408			VP & CFO					
Signatures								
Mark R. Townsend for Scott A. Roe (File)		02/15/2017						
**Signature of Rep		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) 401(k).

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.