# FORM 4

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

OMB APPROVAL				
MB Number:	3235-0287			
stimated average by	urden hours			
er 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

	pe Response	·3 <i>)</i>													
1. Name and Address of Reporting Person * KOONCE CALVIN SCOTT				2. Issuer Name <b>and</b> Ticker or Trading Symbol VSE CORP [VSEC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
6550 RO	ck sprin	G DRIVE		3. Date of Earliest Transaction (Month/Day/Year) 12/03/2007				_		ive title below)		er (specify be	ow)		
ROCKVI	(Street) OCKVILLE, MD 20817				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		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ollowing s)	Ownership Form:	7. Nature of Indirect Beneficial Ownership
					,	Cod	e V	Amount	(A) or (D)	Price					(Instr. 4)
Common share	Stock, par	value \$.05 per	12/03/2007			S		3,691	D	\$ 51.8302	870,699	870,699		D	
	Stock, par nmon Stock	value \$.05 per k, par valu	12/03/2007			S		3,000	11)	\$ 51.6952	0			[	By spouse
				Derivative Sec e.g., puts, call		•		osed of	, or Bei	neficially (	Owned				
1. Title of	2.	3. Transaction	(	Derivative Sec e.g., puts, call	curitie	es Acqu	Person this fo curren	ns who r rm are i	not requ d OMB	uired to re control n	espond unl umber.		ı contained i n displays a	n SEC	1474 (9-02)
Derivative Security (Instr. 3)	or Exercise	Date (Month/Day/Year		Code	of Deri	umber vative	6. Date Ex Expiration (Month/D	ercisabl Date	ble secu	7. Title at Amount of Underlyin	nd of ng	Derivative Security	9. Number of Derivative Securities Beneficially	Owners Form of	
			Execution Date, i	f Transaction Code	of Deri Secu Acqu (A) o	vative prities uired or sosed O) r. 3,	6. Date Ex Expiration	ercisabl Date	ble secu	7. Title a	nd of ng s	Derivative	Derivative	Owners Form of Derivati Security Direct ( or Indire	hip of Indire Benefici Ownersh (Instr. 4)
Security	or Exercise Price of Derivative		Execution Date, i	f Transaction Code	n of Deri' Secu Acqu (A) o Disp of (I (Inst 4, an	vative urities uired or cosed D) r. 3, ad 5)	6. Date Ex Expiration	ercisabl n Date ay/Year)	ble secure and	7. Title at Amount of Underlying Securities	nd of ng s	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivati Security Direct ( or Indirects) (I)	hip of Indire Benefici Ownersh (Instr. 4)

### **Reporting Owners**

D	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KOONCE CALVIN SCOTT 6550 ROCK SPRING DRIVE ROCKVILLE, MD 20817	X	X				

# **Signatures**

Calvin S. Koonce by Craig S. Weber, Attorney-in-Fact		12/04/2007
-*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) The option became exercisable in four equal annual installments commencing on the grant date (01/01/2005).

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.