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

| OMB APPROVAL             |           |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|
| DMB Number:              | 3235-0287 |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |
| ours per response        |           |  |  |  |  |  |

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 and Address of Reporting Person * KIERNAN THOMAS M         |             |  |                           |                    | 2. Issuer Name and Ticker or Trading Symbol VSE CORP [vsec]               |     |           |               |  |                                     |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner   |   |   |   |                              |
| VSE CORPORATION, 6348 WALKER LANE                                  |             |  |                           |                    | 3. Date of Earliest Transaction (Month/Day/Year) 03/12/2019               |     |           |               |  |                                     | [   | X Officer (give title below) Other (specify below)  General Counsel and Secretary  |   |   |   |                              |
| (Street) ALEXANDRIA, VA 22310                                      |             |  |                           | 4. If              | 4. If Amendment, Date Original Filed(Month/Day/Year)                      |     |           |               |  |                                     |   | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person |   |   |   |                              |
| (City) (State) (Zip)   |             |  |                           |                    | Table I - Non-Derivative Securities Acqui                                 |     |           |               |  |                                     | Acqui                                       | ired, Disposed of, or Beneficially Owned   |   |   |   |                              |
| 1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea |             | Execution Date, if Code                          |                           | Code<br>(Instr. 8) | nsaction 4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5) |     |           | of            | red 5. Amount of Securities<br>Beneficially Owned Following<br>Reported Transaction(s)<br>(Instr. 3 and 4) |                                     |   | Ownership<br>Form:<br>Direct (D)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |   |                              |
|  |             |  |                           |                    |   |     | Code      | V             | Amour  | (A) or (D)                          | Price                                       | (I)  |   | (I)<br>(Instr. 4)   | (IIIsti. 4)   |                              |
| Common   | Stock, par  | value \$.05                                      | 03/12/2019                |                    |   |     | A         |               | 4,012  | A                                   | \$ 0  | 33,628   |   |   | D   |                              |
| Common   | Stock, par  | value \$.05                                      | 03/12/2019                |                    |   |     | F         |               | 1,208  | D                                   | \$ 0  | 32,420   |   |   | D   |                              |
| indirectly.  |             |  | Table II -                |                    |   |     | 1         | onta<br>he fo | ained in<br>orm dis<br>sposed o  | n this fo<br>splays a<br>of, or Ben | rm are<br>curre<br>reficial                 | not req  | uired to re   | nformation<br>espond unl<br>ntrol numb  | ess   | EC 1474 (9-<br>02)           |
| Security<br>(Instr. 3)   | Conversion  | 3. Transaction<br>Date<br>(Month/Day/\frac{1}{2} | 3A. Deemed<br>Execution D | ate, if            | 4.<br>Transact<br>Code  | ion | 5. Number | 6. Date       | ate Exer<br>Expirationth/Day   | cisable<br>on Date<br>'Year)        | 7. Ti<br>Amc<br>Undo<br>Secu<br>(Inst<br>4) | tle and bunt of erlying rities r. 3 and Amount or Number   |   | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivati Security Direct ( or Indire | Ownership (Instr. 4)  D) ect |
|  |             |  |                           |                    | Code  | V   | (A) (D)   |               |  |                                     |   | of<br>Shares   |   |   |   |                              |
| Repor  | ting O      | wners  |                           |                    |   |     |           |               |  |                                     |   |  |   |   |   |                              |

| Describes Occasional Address   | Relationships |         |                               |  |  |  |  |
|--------------------------------|---------------|---------|-------------------------------|--|--|--|--|
| Reporting Owner Name / Address | Director      | Officer | Other                         |  |  |  |  |
| KIERNAN THOMAS M               |               |         |                               |  |  |  |  |
| VSE CORPORATION                |               |         | General Counsel and Secretary |  |  |  |  |
| 6348 WALKER LANE               |               |         | General Counsel and Secretary |  |  |  |  |
| ALEXANDRIA, VA 22310           |               |         |                               |  |  |  |  |

# **Signatures**

| Thomas M. Kiernan                | 03/14/2019 |
|----------------------------------|------------|
| ***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).

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.