#### FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per 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

(Fillit of Ty	pe Response	/														
1. Name and Address of Reporting Person * KENDALL CLIFFORD M  (Last) (First) (Middle) VSE CORPORATION, 2550 HUNTINGTON AVENUE  (Street)  ALEXANDRIA, VA 22303-1499			2. Issuer Name and Ticker or Trading Symbol     VSE CORP [VSEC]     3. Date of Earliest Transaction (Month/Day/Year)     09/30/2004  4. If Amendment, Date Original Filed(Month/Day/Year)     10/01/2004							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner						
									_	Officer (g	give title below)	Ot	er (specify be	low)		
										6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						Acquire	lired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)				2A. Deemed Execution Date, if any (Month/Day/Year		(Instr. 8)		(A) or Dispos		sed o	ed of (D) Beneficial		nt of Securities Ily Owned Following Transaction(s) nd 4)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						(	ode	V A		) or D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Commor per share		r value \$.05									23	3,327 (1)			)	
Reminder:	Report on a s	separate line for ea	ch class of securitie				P C fe	ersons ontain orm dis	who res ed in this splays a	forn	n are no ently vali	t require id OMB o	n of inforr d to respo	nd unless t		1474 (9-02)
1. Title of		3. Transaction	Table II - 1	Derivative e.g., puts, 4. Transac Code	Securicalls, v	ties A	equired ts, opti	Persons ontain orm dis I, Dispo ons, con	s who resed in this splays a convertible series of, or nivertible series on Date	Beneration of Se	n are no ently vali	ot require id OMB of Owned  Amount	d to respond control numbers	nd unless t	f 10. Owners Form of Derivati Security Direct ( or Indire	11. Natu of Indire Benefici: Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - )  3A. Deemed Execution Date, i)	Derivative e.g., puts, 4. Transac Code	Securicalls, v	umber erivati ecuritie equired or isposed	P c c feet s, opti	Persons ontain orm dis I, Dispo ions, cor Date Exe Expirat onth/Day	s who resed in this splays a description of the splays a description of the splays and the splays a description of the splays and the splays are splays and the splays are splays as the splays are	Bene ecuri 7. of Se (In	m are no ently valided ficially One ities)  Title and Underlying courities	ot require id OMB of Owned  Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners Form of Derivati Security Direct ( or Indirect)	11. Natu of Indire Benefici: Ownersh (Instr. 4)
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### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KENDALL CLIFFORD M VSE CORPORATION 2550 HUNTINGTON AVENUE ALEXANDRIA, VA 22303-1499	X					

#### **Signatures**

Clifford M. Kendall	10/04/2004

**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) October 1 Form 4 filing indicating exercise of Stock Options (right to buy) was filed in error. There was no exercise.
- (2) Transaction covers four options having exercise prices of 6.50, 6.616, 10.73. and 12.82.
- (3) The options became exercisable in four equal annual installments beginning on the grant dates (6/5/2001, 1/1/2002, 1/1/2003, and 1/1/2004)
- (4) The options expired on four dates (6/4/2006, 12/31/2006, 12/31/2007, 12/31/2008).

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.