FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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02)

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 Type Responses)										
1. Name and Address of Reporting Pe HARRIS JOHN T	2. Issuer Name an VSE CORP [vse		or Tra	ading Syn	nbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) AKIMEKA, LLC, 901 NORTH LAKE 3. Date of Earliest Transaction (Month/Day/Year) DESTINY DRIVE, SUITE 151 03/11/2015						X Officer (give title below) President, Akime	Other (specify b	elow)		
(Street) MAITLAND, FL 32751	4. If Amendment, I	Date Origin	nal Fi	led(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				
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership of Indire Form: Benefici	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock, par value \$.05 per share	03/11/2015		А		926	А	\$ 0	3,102	D	
Common Stock, par value \$.05 per share	03/11/2015		F		250	D	\$ 0	2,852	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 SEC 1474 (9this form are not required to respond unless the form displays a currently valid OMB control number.

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

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Numb	ber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of			and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	De	erivati	ve	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	curitie	es			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	cquire	d			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A) or				4)			Following	Direct (D)	
					Di	ispose	d						Reported	or Indirect	
					of	of (D)					Transaction(s)	(I)			
					(Ir	nstr. 3,	,						(Instr. 4)	(Instr. 4)	
					4,	4, and 5)									
											Amount				
								Data	Emination		or				
								Date Exercisable	Expiration	Title	Number				
								Exercisable	Date		of				
				Code V	' (A	A) (I))				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HARRIS JOHN T AKIMEKA, LLC 901 NORTH LAKE DESTINY DRIVE, SUITE 151 MAITLAND, FL 32751			President, Akimeka, LLC					

Signatures

John T. Harris, by Thomas M. Kiernan, Attorney-in-fact Signature of Reporting Person

03/13/2015 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.