FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 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

1. Name ar															
1. Name and Address of Reporting Person * EBERHART RALPH E				2. Issuer Name and Ticker or Trading Symbol VSE CORP [vsec]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 909 N. WASHINGTON STREET				3. Date of Earliest Transaction (Month/Day/Year) 12/21/2015						Office	r (give title belo	w) (ther (specify b	elow)	
(Street) ALEXANDRIA, VA 22314			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 Acqu						ired, Disposed of, or Beneficially Owned					
(Instr. 3)		Date (Month/Day/Year)	Exect any	Deemed ution Date, if ath/Day/Year	if Code (Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)		Following (s)	Ownership of Form:	7. Nature of Indirect Beneficial	
				(Mon	m/Day/Tear	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect I) Instr. 4)	Ownership (Instr. 4)
Common per share	Stock, par	value \$.05	12/21/2015			A		167	A	\$ 59.71	10,799])	
indirectly.							_								
			Table II -		ative Securiti	ies Acquir	cont the f ed, Di	ained in	n this fo splays a of, or Be	orm are a curre	e not req ntly valid	uired to re d OMB cor	formation spond unle strol numbe	ss	EC 1474 (9- 02)
				(e.g., p	uts, calls, wa	ies Acquire	cont the f ed, Di tions,	ained in form dis sposed of convert	n this fo splays a of, or Be tible sec	orm are a curre neficial urities)	e not req ntly valid	uired to re d OMB cor	spond unle	r.	02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transactio Date (Month/Day/	n 3A. Deeme Execution	(e.g., p d Date, if	4. Transaction Code	ies Acquire arrants, op 5. Numbe	cont the f ed, Di tions, r 6. D and e (Mo	isposed of converted the Exernation	of, or Be tible security of the control of the cont	neficial urities) 7. T Ame	e not req ntly valid	uired to re d OMB cor	spond unle atrol number	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Nature of Indirec Beneficial Ownershi (Instr. 4)

Reporting Owners

Barrella Orana Nama / Addana	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
EBERHART RALPH E 909 N. WASHINGTON STREET ALEXANDRIA, VA 22314	X					

Signatures

Ralph E. Eberhart, by Thomas M. Kiernan	12/23/2015
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.