#### Edgar Filing: VSE CORP - Form 4

VSE CORP Form 4 December 21, 2012 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	OMB Number: Expires: Estimated a burden hou response				
(Print or Type Responses)					
1. Name and Address of Reporting Person <u>*</u> 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)			
(Last) (First) (Middle)	3. Date of Earliest Transaction	(Check an applicable)			
6550 ROCK SPRING DRIVE, SUITE 600	(Month/Day/Year) 12/19/2012	_X_ Director     _X_ 10% Owner       Officer (give title below)     Other (specify below)			
(Street) BETHESDA, MD 20817	4. If Amendment, Date Original Filed(Month/Day/Year)	nth/Day/Year) Applicable Line) _X_ Form filed by Or Form filed by Mo			
		Person			
(City) (State) (Zip)	Table I - Non-Derivative Securities Acq	uired, Disposed of	, or Beneficial	ly Owned	
(Instr. 3) any (Month	emed 3. 4. Securities Acquired ton Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8) (A) or Code V Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock, par value \$.05 per share	A 1,510 A \$ 23.17	898,649	D		
Common Stock, par value \$.05 per share		10,000	I	(By spouse)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of<br/>information contained in this form are not<br/>required to respond unless the formSEC 1474<br/>(9-02)

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## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amour Underl Securit (Instr. 3	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
r o	Director	10% Owner	Officer	Other		
KOONCE CALVIN SCOTT 6550 ROCK SPRING DRIVE SUITE 600 BETHESDA, MD 20817	Х	Х				
Signatures						
Calvin S. Koonce, by Thomas M. Kiernan, Attorney-in-Fact				12/21/2012		
**Signature of Reporting Person				Date		
Explanation of Decremonal						

## **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.