FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
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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).

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	e Responses)																		
Name and Address of Reporting Person * Andrekovich Mark					2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) Chief of Human Capital						
(Last) (First) (Middle) MAXIMUS, INC., ATTN: TREASURY DEPT., 11419 SUNSET HILLS ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/20/2007														
(Street) RESTON, VA 20190				4. I	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)	VA 20170	(State)	(Zip)				Tab	ble I - 1	Non-Deri	ivati	ve Securiti	es Acquired, Disposed of, or Beneficially Owned							
1.Title of Sec (Instr. 3)	curity	Ι	Transaction Date Month/Day/Yea	Ex ur) an	a. Deeme secution I y Ionth/Da	Date	2. if C (I	. Trans ode nstr. 8	action (4. Se (A) o	curities Accor Disposed 3, 4 and 5	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			eneficially ed	6. Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	eport on a sep	parate line for each	class of securit	ies ber	neficially	ow ow	rned dir	rectly (Perso contai	ns w ined	in this fo	rm are	not	required	of informato respon	d unless th		1474 (9-02)	
			Table I								l of, or Ben ertible secu		Ow	ned					
Derivative Conversion Date		*****	any	ĺ	4. Transaction Code ear) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title of Undo Securiti (Instr. 3	erlyii ies	Ü	8. Price of Derivative Security (Instr. 5)	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Ownershi (Instr. 4)		
					Code	V	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares					
Restricted Stock Units (1)	\$ 33.80	03/20/2007			A		6,21	3	<u>(2)</u>	1	(2)	Comn Stoc		6,213	\$ 0	6,213 ⁽³) D		
Report	ing Ov	vners																	
Reporting Owner Name / Address			Relationships																
		Dire	Director 10% Owner Office			er (Other										
Andrekovi	ich Mark																		

Chief of Human Capital

Signatures

RESTON, VA 20190

David R. Francis: As Attorney-In-Fact for: Mark Andrekovick	03/22/2007		
**Signature of Reporting Person	Date		

Explanation of Responses:

MAXIMUS, INC., ATTN: TREASURY DEPT.

11419 SUNSET HILLS ROAD

- * 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) Each RSU represents a contingent right to receive one share of common stock.
- Restricted stock units vest based upon the following schedule, subject to deferred vesting for a longer period at the election of the individual, as permitted by the terms of the agreement: shares Vest Date 1,036 3/31/2008 1,036 3/31/2009 1,036 3/31/2010 1,035 3/31/2011 1,035 3/31/2012 1,035 3/31/2013 Expiration date not applicable to RSUs.
- (3) Reporting person also holds restricted stock units with respect to an additional 4,166 shares of common stock with varying vesting schedules.

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.