FORM 4

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

OMB APPR	OVAL
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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)														
1. Name and Address of Reporting Person* WEBB WELLINGTON E			2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner						
(Last) 11419 SU	NSET HIL	(First) LLS RD		3. Date of E 09/18/200		st Trai	nsactio	on (Month/L	Day/Year)	-	Officer (gi	ve title below)	Ot	her (specify belo	w)
(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group FilingCheck Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
RESTON, VA 20190 (City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acor						ies Acquire	nired, Disposed of, or Beneficially Owned				
1.Title of Sec (Instr. 3)			Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye		3. Trans Code (Instr. 8		saction 4. Securities Act (A) or Disposed		equired 5. Amount of Owned Follo		f Securities Beneficially wing Reported s)		6. Ownership Form:	Beneficial Ownership
							Code	V Am	nount (A) o	r Price				(I) (Instr. 4)	
Reminder: R								containe		orm are no	ot required		nd unless tl		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date,	4. Transac Code	ealls,	warra 5.	ber vative rities ired r osed	containe form dis	ed in this for plays a cure sed of, or Be exertible secretion Date	orm are no rrently val	ot required lid OMB co Owned d Amount ying	to respondent on trol numbers of the second	nd unless tl	of 10. Ownersh Form of Derivativ Security Direct (I or Indire	11. Natur of Indirec Beneficia ve (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. Transac Code	ealls,	5. Numl of Deriv Secur Acqu (A) o Dispo	ber vative rities ired r osed)	contained form distinction distinctions, con 6. Date Executed and Expirate	ed in this for plays a curse of or Betwertible secretisable tion Date y/Year)	neficially (urities) 7. Title an of Underly Securities (Instr. 3 an	ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	of 10. Ownersh Form of Derivativ Security: Direct (I or Indire (s) (I)	11. Natur of Indirec Beneficia ve (Instr. 4)

Reporting Owners

D (1 0 N /		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WEBB WELLINGTON E 11419 SUNSET HILLS RD RESTON, VA 20190	X						

Signatures

David R. Francis: As Attorney-In-Fact for: Wellington E. Webb	09/19/2007
**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) Each RSU represents a contingent right to receive one share of common stock.
- (2) 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 award: Shares Vest Date 0 9/18/2008 0 9/18/2009 60 9/18/2010 Expiration date not applicable to RSUs.
- (3) Reporting person also holds restricted stock units with respect to an additional 7,599 shars 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.