FORM 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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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

(Fint of Type Responses)											
1. Name and Address of R FRANCIS DAVID	2. Issuer Name an MAXIMUS INC		Tradi	ing Symbo	ol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) C/O MAXIMUS INC RD	3. Date of Earliest Transaction (Month/Day/Year) 02/20/2008						X_Officer (give title below) Other (specify below) General Counsel				
RESTON, VA 20190		4. If Amendment, D	ate Origina	l File	d(Month/Da	y/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 2. Transaction (Instr. 3) Date (Month/Day/Yee)			Execution Date, if any	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Owned Following Reported Transaction(s)	Ownership of Indi Form: Benefi	Beneficial
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		02/20/2008		М		20,000	А	\$ 27	20,000	D	
Common Stock		02/20/2008		S		20,000	D	\$ 37.091	0	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 SEC 1474 (9-02) in this 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.		3A. Deemed	4.				6. Date Exercisable and		7. Title and Amount		8. Price of	9. Number of		11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	on of Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired (A)			(Instr. 3 and 4) (Instr. 5)		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					or D	isposed					Owned	Security:	(Instr. 4)	
	Security					of (I	of (D)					Following	Direct (D)		
						(Instr. 3, 4,					Reported	or Indirect			
					and 5)							Transaction(s)	(I)		
											Amount		(Instr. 4)	(Instr. 4)	
											or				
									Expiration		Number				
								Exercisable	Date	THE	of				
				Code	v	(A)	(D)				Shares				
				coue	•	(11)	(D)								
Stock	\$ 27	02/20/2008		м			20.000	(1)	10/27/2014	Common Stock	20.000	¢ 0.	20.000(1)	D	
Options	\$27	02/20/2008		М			20,000	<u>, 11</u>	10/2//2014	Stock	20,000	\$ 0	30,000 <u>(1)</u>	D	

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
FRANCIS DAVID C/O MAXIMUS INC 11419 SUNSET HILLS RD RESTON, VA 20190			General Counsel						

Signatures

David R. Francis- General Counsel	02/21/2008
**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).

 $(1) \begin{array}{l} \text{Effective 10/27/2004-Non Qualified Stock Options to acquire 70,000 shares of common stock were issued with the following vesting schedules Shares Vest Date 23,334 10/27/2004 23,333 10/27/2005 23,333 10/27/2005 23,333 10/27/2006. These options expire on 10/27/2014. } \end{array} \right.$

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.