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)																	
1. Name and Address of Reporting Person * THOMPSON JAMES R				2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]							mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O WINSTON & STRAWN, 35 WEST WACKER DRIVE, SUITE 4600				3. Date of Earliest Transaction (Month/Day/Year) 12/16/2008							/Year)	_	Officer (g	ive title below)	Oi	her (specify below	v)	
(Street) CHICAGO, IL 60601				4. If Amendment, Date Original Filed(Month/Day/Year)							/Day/Year)		6. Individual or Joint/Group FilingCheck Applicable Line) Form filed by More Reporting Person Form filed by More than One Reporting Person					
(City)		(State)	(Zip)				Tal	ble I -	Non-De	rivativo	e Securiti	ies Acquir	ed, Dispose	d of, or Ber	neficially Ow	ned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/			2A. Deemed 3. Transa Execution Date, if Code			(A) or Disposed of (D) (Instr. 3, 4 and 5)			of (D) O 5) T				Ownership of Form: Be Direct (D)	Nature f Indirect eneficial wnership nstr. 4)				
								Code	. V	Amoui	nt (A) or	Price				(I) (Instr. 4)	1)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date	(e.g.,	, puts, c 4.	alls,	5. Num of Deri Secu Acqu (A) o	rants, aber vative urities uired or osed o) r. 3,	ired, Disoptions, 6. Date and Exp	red, Disposed of, or Beneficial ptions, convertible securities) 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title of Unc Security (Month/Day/Year)		rently va neficially (urities)	valid OMB control number ly Owned e and Amount lerlying tites Security Security 3 and 4) (Instr. 5) Ref. Tr.		9. Number o	of 10. Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)	
									Date Exercis		xpiration late	Title	Amount or Number of Shares					
					Code	V	(A)	(D)					Silaies					
Restricted Stock Unites (1)	\$ 33.87	12/16/2008			Code	V	(A) 74	(D)	(2	1	(2)	Commo Stock		\$ 0	74 (3)	D		

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner Officer		Other			
THOMPSON JAMES R C/O WINSTON & STRAWN 35 WEST WACKER DRIVE, SUITE 4600 CHICAGO, IL 60601	X						

Signatures

David Francis: As Attorney-In-Fact for: James R. Thompson	12/18/2008
**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) Each RSU represent 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 12/16/2009 0 12/16/2010 74 12/16/2011 Expiration date not applicable to RSUs.
- (3) Reporting person also holds restricted stock units with respect to an additional 14,925 shares of common stock with varying vesting schedules.
- (4) 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 12/17/2009 0 12/17/2010 73 12/17/2011 Expiration date not applicable to RSUs.
- (5) Reporting person also holds restricted stock units with respect to an additional 14,999 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.