## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

	e Responses)													
Name and Address of Reporting Person * POND PETER			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)	(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/31/2012				_	Officer (gi	ve title below)	Oth	ner (specify belo	w)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/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				ine)	
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					ies Acquire	nired, Disposed of, or Beneficially Owned					
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	, if Co	Transa ode nstr. 8)	(A) (Ins	Securities Action Disposed Str. 3, 4 and 5	1 of (D) Ov 5) Tr (Ir			ed I	Ownership Form:	Beneficial Ownership	
Reminder: R	eport on a sep						Persons	who respo	ond to the	collection	of inform	ation	SEC 1	474 (9-02)
Reminder: R	eport on a se			Derivative Secu			containe form dis	ed in this fo plays a cur	orm are no rrently val neficially C	ot required id OMB co	l to respor	nd unless th		474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	3A. Deemed Execution Date	(e.g., puts, calls, 4. Transaction Code	5. Numl of	ber vative rities hired or osed b) r. 3,	containe form dis	ed in this for plays a cure sed of, or Besevertible securicisable and the control of the control	orm are no rrently val neficially C	ot required id OMB co Owned d Amount ying	I to respond control num	nd unless th	f 10. Ownersh Form of Derivativ Security: Direct (E or Indire	11. Natur of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date any	(e.g., puts, calls, 4. Transaction Code	5. Number of Deriv Securion Acqui (A) of Disposor of (D) (Instru	ber vative rities hired or osed b) r. 3, d 5)	containe form dis red, Dispos ptions, con 6. Date Exe and Expirat	ed in this fo plays a cur sed of, or Ber vertible sect ercisable ion Date y/Year)	rently valuation are no rently valuation of Underly Securities	ot required id OMB co Owned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownersh Form of Derivativ Security: Direct (I or Indirects) (I)	11. Natur of Indired Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

D # 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
POND PETER	X					

### **Signatures**

David R. Francis: As Attorney-In-Fact for: Peter Pond	01/31/2012
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 Restricted Stock Unit 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 individual, as permitted by the terms of the award: Shares Vest Date 0 1/31/2013 0 1/31/2014 56 1/31/2015 Expiration date not applicable to RSUs
- (3) Reporting person also holds restricted stock units with respect to an additional 96,289.758 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.