## FORM 4

Instruction 1(b).

UNITE

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

OMB APPROVAL

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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

Name and Address of Reporting Person * POND PETER			1	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) 02/29/2012					_	_ Officer (give	title below)	Other	(specify below)	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	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 Own				ficially Owned									
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		n Date, if	(Instr. 8	(A)	4. Securities Acquired (A) or Disposed of (I) (Instr. 3, 4 and 5)				I O	wnership of orm:	eneficial
				(Month/L	Day/Year)	Code	e V Am	(A) or		str. 3 and 4)	Ċ		r Indirect (I	wnership nstr. 4)
Reminder: Re	port on a sep	arate line for each c	lass of securities be	eneficially	owned dir	ectly or	Persons in this fo	rm are not i	required to	respond u		on contained form display		74 (9-02)
Reminder: Re	port on a sep	arate line for each c					Persons in this fo	rm are not i ly valid OM	required to B control r	respond ( number.				74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table II -  3A. Deemed Execution Date, if	Derivative (e.g., puts, 4. Transact Code	e Securiti , calls, wa  5. No tion Deni Secu ) Acqu or Di (D) (Instr	es Acquarrants, imber of vative rities sired (A) isposed of	Persons in this fo a current tired, Dispose options, conv	rm are not in ly valid OM ed of, or Ben ertible securer cisable tion Date	required to B control r eficially Ow	respond unumber. ned  I Amount ing	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersl (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -  3A. Deemed Execution Date, if	Derivative (e.g., puts, 4. Transact Code	e Securiti , calls, wa 5. Nu tion Deriv Secu ) Acqu or Di (D)	es Acquerrants, amber of vative rities sired (A) (A) (A) (B) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	Persons in this fo a current sired, Dispose options, conv f 6. Date Ex and Expira (Month/Date of f f f f f f f f f f f f f f f f f f	rm are not in the property of the secundary of the secund	required to B control reficially Owrities)  7. Title and of Underlyi Securities (Instr. 3 and	respond unumber. ned  I Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Owners (Instr. 4

#### **Reporting Owners**

D 4 0 V /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
POND PETER	X				

### **Signatures**

David R. Francis: As Attorney-In-Fact for: Peter Pond	03/01/2012
**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) Dividend equivalent rights accrued on previously-awarded restricted stock units (RSUs) which vest proportionately with the RSUs to which they relate. Each dividend equivalent right is the economic equivalent of one share of MAXIMUS common stock.

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.