## FORM 4

(Print or Type Pecnonces)

# 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

1. Name an																
1. Name and Address of Reporting Person* BELIVEAU RUSSELL A			2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner							
MAXIM	(Last) (First) (Middle) MAXIMUS, INC. ATTN: TREASURY DPERATIONS, 1891 METRO CENTER DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 12/14/2012						Office	er (give title belo	ow)	Other (specify	below)		
RESTON	N, VA 2019	(Street) 90-5207			4. If Amendme	nt, Da	ate Orig	inal l	Filed(Mont	h/Day/Y	ear)	_X_ Form fil	ed by One Repo	Group Filing orting Person One Reporting		ble Line)
(City	()	(State)	(2	(Zip)		Tabl	le I - No	n-De	erivative	Securi	ties Acq	uired, Disp	osed of, or l	Beneficially	Owned	
(Instr. 3) Date			Day/Year)		if Co	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Following	6. Ownership Form:	Beneficial	
					(Month/Day/Yea		Code	V	Amount	(A) or (D)	Price	(Instr. 3	or In (I)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	n Stock (1)		12/14/2	2012			S		5,000	D	\$ 63.225 (2)	34,652			D	
Reminder:	Report on a s				uitiaa kamafiaialle		محسنة المحا	41								
		ерагате ппе		Table II -	Derivative Secu	rities	s Acquii	Per cor the	rsons whatained in form dis	no res n this splays	form and a current a current and a current according a current and a current according a current and a current according a current a	re not requently valid	OMB con	formation spond unle trol numbe	ess	1474 (9-02)
1. Title of	2.	3. Transacti		Table II -	,	rities	s Acquir	Per cor the	rsons whatained in form dis	no res n this splays of, or l	form and a current according a current and a current according a current and a current and a current according a current accordi	re not requently valid	uired to res	spond unle	ess er.	1474 (9-02)
1. Title of Derivative Security (Instr. 3)			ion 3A Ex y/Year) an	Table II -  A. Deemed xecution Da	Derivative Secu (e.g., puts, calls,	rities warr 5. Nu of De Se Ac (A Di of (In	s Acquirants, o	red, I	rsons whatained in form disposed is, conver	of, or lecisable	Beneficia ecurities e 7. de An Un	re not requently valid	uired to res	spond unle trol numbe	of 10. Owners Form o y Derivat Security Direct ( or Indir	11. Nation of Indirection of Indirec

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BELIVEAU RUSSELL A MAXIMUS, INC. ATTN: TREASURY OPERATIONS 1891 METRO CENTER DRIVE RESTON, VA 20190-5207	X					

### **Signatures**

David R Francis: As Attorney-In-Fact for: Russell Beliveau	12/17/2012
**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) These grants has previously been reported on Table II
- (2) Weighted average sales price for prices ranging from \$63.17 to \$63.29. The reporting person will provide full information regarding the number of shares purchased or sold at each separated price upon request by the Commission staff, the issuer, or a security holder of the issuer.

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.