FORM 4

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

OMB APPROVAL					
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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

1 Nama ar																		
1. Name and Address of Reporting Person * FRANCIS DAVID					2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner						
(Last) (First) (Middle) C/O MAXIMUS INC, 1891 METRO CENTER DRVIE				3. Date of Earliest Transaction (Month/Day/Year) 04/03/2013						X	X Officer (give title below) Other (specify below) General Counsel							
(Street) RESTON, VA 20190				4. If	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 PersonForm filed by More than One Reporting Person						
(City	-	(State)	(Zip)		Table I - Non-Derivative Securit				ecuritie	es Acq	cquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		Execu	Deemed ution Date, if	f Code (Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	(D) Beneficia Reported		nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	Beneficial				
				(Mon	(Month/Day/Year)		Code V		nount	(A) or (D) Price			(Instr. 3 and 4)			Ownership (Instr. 4)		
Common	Stock (1)		04/03/2013			S		2,8	300	D	\$ 80.07 (2)	7 8,	186			D		
Reminder:	Report on a s	separate line fo	or each class of secu	rities b	eneficially ov	wned dii	ectly	or indi	irectly								•	
Reminder:	Report on a s	separate line fo		Deriva	ative Securit	ies Acq	Po co th	ersons ontain e forn	s who ed in n dis	o respo this fo plays a	orm a a curr enefici	are no rently ially O	t requ valid		ormation pond unle rol numbe	ss	1474 (9-0	
			Table II -	Deriva	ative Securit	ies Acqı	Po co th uired, optic	ersons ontain e forn Dispo	s who ed in n dis osed o nvert	o respo this fo plays a f, or Be ible sec	orm a curr enefici urities	are no rently ially O	t requ valid wned	ired to res OMB cont	pond unle rol numbe	ss r.	, in the second	
1. Title of		3. Transaction Date	Table II - on 3A. Deemed Execution D	Deriva	ative Securit buts, calls, wa 4. Transaction Code (Instr. 8)	ies Acquarrants,	Per continuired, option	ersons ontain e forn	s who led in n dis lessed o nvert Exerc oiratio	f, or Beible sec	enefici urities 7. At Ur Se	ially Oes) Title amount nderly ecurities nstr. 3	ot requivalid Owned and of ing es	ired to res OMB cont	pond unle	of 10. Owners Form of Derivat Security Direct (or Indir	hip of Ind Benef ive Owne (Instr. D) ect	

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FRANCIS DAVID C/O MAXIMUS INC 1891 METRO CENTER DRVIE RESTON, VA 20190			General Counsel					

Signatures

David R Francis - General Counsel	04/05/2013
**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 sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 28, 2013. These grants had previously been reported on Table
- (2) Weighted average sales price for prices ranging from \$79.57 to \$80.35. The reporting person will provide full information regarding the number of shares purchased or sold at each separate 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.