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

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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

(Responses	9)															
Name and Address of Reporting Person * Andrekovich Mark					2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Chief of Human Capital						
(Last) (First) (Middle) MAXIMUS, INC., ATTN: TREASURY DEPT., 1891 METRO CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 12/23/2013												
(Street)				4. If A	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						
RESTON, V	VA 2019			(77.)													
(City)		(State)		(Zip)		7	able	I - Nor	-Dei	rivative S	ecuritie	es Acqu	uired, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any		f Coo	Code (Instr. 8)		(A) or Disposed of (I (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s) Ownership Form:		7. Nature of Indirect Beneficial					
				(Month/Day/Year)			ode	C		(A) or (D)	Price	(Instr. 3 a			Ownership (Instr. 4)		
Common St	Stock (1)		12/2	3/2013				G		1,032	` ′	\$ O	49,003			D	
Common Stock (1) 12/23/2013 Common Stock (2) 12/23/2013					S			4,303	D	\$ 43.68 (3)				D			
		eparate line fo			rities be	eneficially	owned		ly or			(3)					
Common St		eparate line fo		class of secur	Deriva	ative Secur	ities A	direct	Pers cont the t	indirectly sons wh tained ir form dis	o responding this for plays a	ond to orm ar a curre	e not requently valid		ormation spond unle	SS	1474 (9-02)
Reminder: Rep	eport on a s	•	or each	Table II -	Deriva	ative Securi	ities A	direct	Pers cont the t	indirectly sons wh tained ir form dis	o responding this for plays a of, or Beible sec	ond to orm ar a curre	e not requently valid	ired to res	spond unle rol numbe	r.	``
Reminder: Rep 1. Title of Derivative Security (Instr. 3) Pr	eport on a s	3. Transactio	or each	Table II - 1	Deriva	ative Securiouts, calls, v 4. Transactior Code	5. Num of Deri Secu Acq	direct cquire its, op varive varive oosed or oosed oor, 3,	Personn the f	indirectly sons wh tained ir form dis	o responding this for plays a soft, or Beible sections all the plays a soft of the pla	ond to	e not requently valid	ired to res	spond unle	of 10. Owners Form o Derivat Security Direct (or Indir	11. Nat of Indir f Benefic Owners (Instr. 4

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Andrekovich Mark MAXIMUS, INC., ATTN: TREASURY DEPT. 1891 METRO CENTER DRIVE RESTON, VA 20190			Chief of Human Capital			

Signatures

12/26/2013 David R. Francis: As Attorney-In-Fact for: Mark Andrekovich

**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) The reporting person made a gift of these shares to an IRC(c) (3) Charitable organization.
- (2) These sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 16, 2013. These grants had previously been reported on Table II.
- (3) Weighted average sales price for prices ranging from \$43.52 to \$43.85. 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.