### FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours 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 37					-									
1. Name and Address of Reporting Person* RUDDY RAYMOND B			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) (First) (Middle) C/O MAXIMUS INC, 1891 METRO CENTER DRIVE			o ornamen	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2015					-	Officer (g	ive title below)	Oth	er (specify belo	<u>v)</u>
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person				
RESTON, VA 20190 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					ties Acquire	ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if		Code (Instr.	(A	(A) or Disposed of (D		(D) Owned Following Reported Transaction(s)		ted [	Ownership of Form:	7. Nature of Indirect Beneficial Ownership	
				(World) Da	iy/ i cai	Code	e V A	mount (A) (D)	or	(Instr. 3 and 4)			or Indirect (I) Instr. 4)	
Reminder: R							Contain			ot realities	d to roeno	nd linlace ti	10	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date,	(e.g., puts, o 4. Transac Code	ealls, we state of the state of	arrants, umber erivative curities equired ) or sposed (D) astr. 3,	form dispersions, co  6. Date Exand Expira (Month/Da	splays a cu sed of, or Be nvertible sec ercisable tion Date	rrently val	Owned  Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	of Indirect Beneficial Ownersh (Instr. 4)
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#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
RUDDY RAYMOND B C/O MAXIMUS INC 1891 METRO CENTER DRIVE RESTON, VA 20190	X					

## **Signatures**

David R. Francis: As Attorney-In-Fact for: Raymond B Ruddy	06/19/2015
**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 06/17/2016 0 06/17/2017 39 06/17/2018 Expiration date not applicable to RSUs
- (3) Reporting person also holds restricted stock units with respect to an additional 167,378 shares of common stock with varying vesting schedules.
- (4) Restricted Stock Units vest based upon the following schedule, subject to deferred vesting for a longer period of the election of the individual, as permitted by the terms of the award: Shares Vest Date 0 06/18/2016 0 06/18/2017 39 06/18/2018 Expiration date not applicable to RSUs
- (5) Reporting person also holds restricted stock units with respect to an additional 167,417 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.