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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Andrekovich Mark					MAXIMUS INC [MMS]								ionship of Reporting Person(s) to Issuer (Check all applicable) ector 10% Owner				
(Last) (First) (Middle) C/O MAXIMUS,INC. ATTN: TREASURY DEPT, 1891 METRO CENTER DR													Chief of Human Capital				
(Street)					_X_Form								dual or Joint/Group Filing(Check Applicable Line) filed by One Reporting Person filed by More than One Reporting Person				
RESTON, VA 20190 (City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disp									osed of, or Beneficially Owned			
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		, if	1	3. Transaction Code		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		5. Amoun Beneficial	nt of Securities Illy Owned Following Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
							Code	V	Amour	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock (1)			12/15/2017				S		2,700		\$ 72	20,296			D		
							es Acquir	ed, Di	sposed	of, or Ben	eficial		OMB COM	ioi nambe	•		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Date any			war 5 on N o C S	es Acquir	and Expiration Date (Month/Day/Year) Ar Ur Se			eficiallrities) 7. Ti Amo Undo Secu	not requ ntly valid	8. Price of Derivative Security (Instr. 5)	spond unles trol number.	of 10. Owners: Form of	` /	
	Security						A) or Disposed of (D) Instr. 3,					1.		Reported Transaction(s (Instr. 4)	or Indire	ect	
					Code V	<i>I</i> ((A) (D)	Date Exer		Expiration Date	Title	Amount or Number of Shares					
Repor	ting O	wners															
Reporting Owner Name / Address				Relationships													
				D	Director 10% Owner				Officer			Other					

Chief of Human Capital

Signatures

Andrekovich Mark

1891 METRO CENTER DR RESTON, VA 20190

David R. Francis: As Attorney-In-Fact for: Mark Andrekovich	12/18/2017	
**Signature of Reporting Person	Date	

Explanation of Responses:

C/O MAXIMUS,INC. ATTN: TREASURY DEPT

- * 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 December 7, 2017.

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.