## FORM 4

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

OMB APPRO\	/AL
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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 Typ	e Responses	)													
Name and Address of Reporting Person*  Romeo Thomas D.			2. Issuer Name and Ticker or Trading Symbol MAXIMUS, INC. [MMS]					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner						
(Last) (First) (Middle) 1891 METRO CENTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 11/23/2020					_>	X Officer (give title below) Other (specify below)  Group General Manager				w)	
(Street)			4	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				ne)	
RESTON, VA 20190 (City) (State) (Zip)			(Zip)	Table I. Non Davinative Securities Asset					es Acquire	uired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any	ned n Date, if	3. Trans Code (Instr. 8		4. Securities (A) or Dispo		quired 5. A of (D) Ow	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Beneficially	6. 7. Ownership of	7. Nature of Indirect Beneficial	
	(World) Day			(Month/Day/		Co	de	V Amo	(A) or ount (D)	,	str. 3 and 4			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Reminder: R	Report on a se	eparate line for eacl	class of securities	benefician	ly owned	uncen	P	ersons v	vho respo l in this for lays a curr	rm are not	required	to respon	d unless th		474 (9-02)
Reminder: R	Report on a se	eparate line for each	class of securities	benefician	y owned	directi	P	ersons v	l in this fo	rm are not	required	to respon	d unless th		474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II -	Derivative (e.g., puts, 4. f Transac Code	5. Notion of E Section Acquired or E	ies Acq arrants lumber Derivati urities quired (Dispose	quired for for for for for for for for for for	Persons vontained orm dispose ons, conv	I in this for lays a current of, or Benertible securcisable on Date	rm are not rently valid neficially O	t required d OMB co wned d Amount	to respondentrol num	9. Number of Derivative Securities Beneficially Owned	f 10. Ownersh Form of Derivativ Security:	11. Natu of Indire Benefici Ownersh (Instr. 4)
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	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Romeo Thomas D. 1891 METRO CENTER DRIVE RESTON, VA 20190			Group General Manager			

### **Signatures**

David R. Francis: As Attorney-In-Fact for: Thomas D. Romeo	11/25/2020
**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 of the election of the individual, as permitted by the terms of the award: Shares Vest Date 3458 09/30/2021 3457 09/30/2022 3457 09/30/2023 Expiration date not applicable to RSUs
- (3) Reporting person also holds restricted stock units with respect to an additional 25,404 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.