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MAXIMUS	S INC								
Form 4									
October 04	, 2007								
FOR							PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
	this box		0	,		Expires:	January 31,		
if no lo subject		MENT OF CHA	ANGES IN	BENEFICIAL OV	WNERSHIP OF	Estimated average			
Section			SECU	RITIES		burden hours per			
Form 4						response	•		
Form 5	r ncu pu	rsuant to Section	n 16(a) of t	he Securities Exchan	nge Act of 1934,				
obligat may co <i>See</i> Ins 1(b).	Section 171		•	lding Company Act t Company Act of 1		n			
(Print or Type	e Responses)								
1. Name and Address of Reporting Person <u>*</u> HALEY JOHN J			ol	d Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
MAXIMUS INC [MMS]				C [MMS]	(Check all applicable)				
(Last)					(chief				
			h/Day/Year) 2/2007		X_ Director 10% Owner Officer (give title Other (specify below) below)				
	(Street)	4. If A	mendment, D	Date Original	6. Individual or Jo	oint/Group Fili	ng(Check		
			Month/Day/Yea	-	Applicable Line)		8		
ARLINGT	TON, VA 22203				_X_ Form filed by 0 Form filed by M Person	One Reporting P Iore than One R			
(City)	(State)	(Zip) T							
(eng)	(blute)	(Zip) T	able I - Non-	Derivative Securities A	cquired, Disposed of	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Date		3.	4. Securities		. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, in any	Code	onAcquired (A) or Disposed of (D)		Form: Direct D) or Indirect	Indirect Beneficial		
(11154170)		(Month/Day/Year		(Instr. 3, 4 and 5)	· · · ·	I)	Ownership		
					U .	Instr. 4)	(Instr. 4)		
				(A)	Reported Transaction(s)				
			Code V	or Amount (D) Price	(Instr. 3 and 4)				
Reminder: R	eport on a separate line	e for each class of s	ecurities bene	eficially owned directly o	or indirectly.				
				information cont required to respo	pond to the collect ained in this form and unless the form atly valid OMB cor	are not m	SEC 1474 (9-02)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		(Instr. 5)

number.

	Derivative Security			Securi Acqui (A) or Dispos of (D) (Instr. 4, and	red sed 3,				
			Code	V (A)	(D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units (1)	\$ 44.87	10/02/2007	А	56	(2)	(2)	Common Stock	56	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships						
I. S.	Director	10% Owner	Officer	Other			
HALEY JOHN J 901 N GLEBE ROAD ARLINGTON, VA 22203	Х						
Signatures							
David R. Francis: As Attorney- Haley		10/04/2007					
delta se a se	-						

<u>**Signature of Reporting Person</u>

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 RSU represents a contingent right to receive one share of common stock.
- Restricted stock units vest based upon the following schedule, subject to deferred vesting for a longer period at the election of the
 (2) individual, as permitted by the terms of the award: Shares Vest Date 0 10/2/2008 0 10/2/2009 56 10/2/2010 Expiration date not applicable to RSUs.
- (3) Reporting person also holds restricted stock units with respect to an additional 4,900 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.