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Andrekovich N Form 4	Mark										
November 13,	2018										
FORM	4 INITED	STATES	SECU	DITIES /		СПАЛ	JCF	COMMISSION		PPROVAL	
	UNITED	SIAIES		ashington			NGE		Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See Instruction Subject See Instruction See Instruction							nge Act of 1934, of 1935 or Sectio	Estimated burden hou response	urs per		
See Instruct 1(b).	tion	00(11)	or the r		. compu	ly 1100	01 1				
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> Andrekovich Mark			2. Issuer Name and Ticker or Trading Symbol MAXIMUS INC [MMS]				5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O MAXIM TREASURY CENTER DR	3. Date of Earliest Transaction (Month/Day/Year) 11/12/2018					Director 10% Owner X Officer (give title Other (specify below) below) Chief of Human Capital					
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) RESTON, VA 20190					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Tal	ble I - Non-l	Derivative	Securit	ties A	cquired, Disposed	of, or Beneficia	lly Owned	
	. Transaction Date Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V		(A) or of (D) 4 and 5) (A) or	Price	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Repor	t on a separate line	e for each cl	ass of sec	curities bene	ficially own	ned dire	ctly o	r indirectly.			
					inforn requir	nation ed to r lys a cl	conta respo	pond to the colle ained in this form and unless the fo atly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab			curities Acq ls, warrants				Beneficially Owned ecurities)	1		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorDerivative	Expiration Date	Underlying Securities	Der

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	A) d of	(Month/Day/	Year)	(Instr. 3 and	4)	Sect (Ins
				Code V	(A)	~ /	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock (1)	\$ 67.23	11/12/2018		А	12,643		(2)	(2)	Common Stock	12,643	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Andrekovich Mark C/O MAXIMUS,INC. ATTN: TREASURY DEPT 1891 METRO CENTER DR RESTON, VA 20190			Chief of Human Capital			
Signatures						
David R. Francis: As Attorney-In-Fact for: Mark Andrekovich		11/13	3/2018			
**Signature of Reporting Person		Da	ate			

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.

Restricted Stock Units vest based upon the following schedule, subject to deferred vesting for a longer period at the election of individual,
(2) as permitted by the terms of the award: Shares Vest Date 2529 09/30/2019 2529 09/30/2020 2529 09/30/2021 2528 09/30/2022 2528 09/30/2013 Expiration date not applicable to RSUs

(3) Reporting person also holds restricted stock units with respect to an additional 25,685.313 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.