## Edgar Filing: BELIVEAU RUSSELL A - Form 4/A

BELIVEAU	RUSSELL A											
Form 4/A												
January 04, 2	2019											
FORM	1 4									PPROVAL		
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287				
Check thi				0 /					Expires:	January 31,		
if no long		EMENT O	F CHAN	GES IN H	BENEFI	CIA	LOW	NERSHIP OF		2005		
subject to Section 1				SECURITIES					Estimated average burden hours per			
Form 4 or									response			
Form 5	Filed r	oursuant to	Section 16	6(a) of the	Securiti	ies Ez	xchang	ge Act of 1934,		0.5		
obligation	ns Section 1			• •				f 1935 or Sectio	n			
may cont <i>See</i> Instru 1(b).	inue.		of the Inv	•	•	· ·						
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> BELIVEAU RUSSELL A S			2. Issuer	2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to				
			Symbol					Issuer				
	MAXIMUS INC [MMS]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	Transaction			(Chev	t an applicable)			
			(Month/Da	/onth/Day/Year)				_X_ Director10% Owner				
C/O MAXIN	MUS,INC. AT	TN:	12/18/20	-				Officer (give title Other (specify				
TREASURY	Y DEPT, 1891	METRO						below)	below)			
CENTER D	R											
	(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Mo			Filed(Month/Day/Year)					Applicable Line)				
			12/19/2018					_X_ Form filed by One Reporting Person				
				010				Form filed by More than One Reporting Person				
	(7							1 crson				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security (Month/Day/Y		h/Day/Year) Execution Date, if			onAcquired	l (A) c	or	Securities	Form: Direct Indir	Indirect		
(Instr. 3) any			Code Disposed of (D)					Beneficially	(D) or	Beneficial		
		(Month/	/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(111501.4)	(11150.4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common									_	(2)		
Stock $(1)$	12/18/2018			G	50	D	\$0	37,817	Ι	In Trust (2)		
Common Stock	12/19/2018			G	100	D	\$0	37,717	Ι	In Trust (2)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
hepoting of her function	Director	10% Owner	Officer	Other		
BELIVEAU RUSSELL A C/O MAXIMUS,INC. ATTN: TREASURY DEPT 1891 METRO CENTER DR RESTON, VA 20190	Х					
Signatures						
David R. Francis: As Attorney-In-Fact for: Russell A Beliveau	A	01/04	4/2019			
**Signature of Reporting Person		D	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) The reporting person made a gift of these shares to an IRC 501(c)(3) Charitable organizations.
- (2) These shares were held by a family trust, beneficial ownership of which was attributed to reporting person.

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.