FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OIVIB APPI	ROVAL
OMB Number:	3235-0287
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person* BENTON JESS E III			2. Issuer Name ar				me and Ticker or Trading Symbol IDUSTRIES INC /DE/ [ABM]					(Chec	k all applica Director	able)	p Person(s) to Issue 10% Own Other (sp		ner		
(Last) 160 PAC	(FIC AVE	First) STE. 222	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/30/2004								X	Officer (give title below) Executive \		below) Vice President		еспу
(Street) SAN FRANCI	SCO	A	94111		4	I. If Am	endm	ent, Date	of Original	Filed	(Month/Da	y/Year)		6. Indi Line) X	Form file	ed by One	Filing (Checl Reporting P e than One F	erson	
(City)	(8	State)	(Zip)	n-Der	rivati	ive S	ecur	ities Ac	nuired	Dis	nosed o	of or Re	nefic	ially	Owned				
1. Title of Security (Instr. 3)		2. Trai	2. Transaction		2A. Deemed 3. Execution Date, if any Co		3. Transa Code	Transaction Disposed Of (D) Code (Instr.		ies Acquire	s Acquired (A) or f (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following		6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	t In	Nature of direct eneficial wnership		
								Code	v	Amount	(A) o (D)	Pri	ice	Reported Transaction (Instr. 3 au	tion(s)		(1)	(Instr. 4)	
Common	Stock		1		30/20	0/2004			G	v	250	250 D \$		22.09	137,182		I	1 F	enton 996 amily rust
Common Stock		12/22/2004				М	м 23,770		0 A	\$	\$9.375 25,4		21 ⁽¹⁾	D					
Common	Common Stock 1:		12/	/22/2004				G	V	23,77	0 D	\$	9.375	1,651		D			
Common Stock		12/22/2004				G	v	23,770	23,770 A \$		9.375	160,952		I	1 F	Senton 1996 Samily Trust			
Common	Stock			12/	22/20	004			М		120,00	00 A		\$ <mark>10</mark>	121,	651	D	\top	
Common	Stock			12/	22/20	004			G	V	120,00	00 D		\$ <mark>10</mark>	1,6	51	D		
Common	Stock			12/	22/20	004			G	v	120,00	00 A		\$10	280,	952	I	1 F	Senton 996 amily Trust
			Table II -	Deriv	vativ . put:	e Sed s. cal	curit Is. v	ies Acq varrants	uired, I	Disp	osed of, convertil	or Ben	eficia iritie	ally O	wned				
1. Title of Derivative Security (Instr. 3) 2. Conversio or Exercis Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4.	action	5. Number of 6. Derivative		6. Date Expiration	. Date Exercisal xpiration Date Month/Day/Year		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e Owners S Form Direct Or Ind (I) (In:	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Si	- 1		(Instr. 4)	S.1(3)		
Stock Options ⁽²⁾	\$9.375	12/22/2004			M	М		23,770	06/18/199	7 ⁽³⁾	06/18/2006	Common Stock	23,	23,770 \$		0	I)	
Stock Options ⁽⁴⁾	\$10	12/22/2004			M	120,000		12/17/199	6 ⁽⁵⁾	12/17/2006	12/17/2006 Common Stock		,000	\$0 0		D			
ynlanatio	n of Respons	206.																	

- 1. Includes 786 shares acquired through the Employee Stock Purchase Plan, from August through October 2004.
- 2. Employee Time Vested Stock Options.
- 3. On the anniversary date of the grant, vest 20% each year for five years.
- 4. Price Vested Performance Options.
- 5. Vest during the first four years at a rate tied to the price of ABM's common stock, 25% at each of \$12.50, \$15.00, \$17.50, and \$20.00, and to the extent not accelerated vest 12/17/2004.

s/Jess E. Benton, III

12/23/2004

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.