FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * $\underline{FARWELL\ DAVID\ L}$						2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]									all applic	cable) or	g Person(s) to Is		wner
(Last) 551 FIFT SUITE 3	1 FIFTH AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 03/18/2015								below)	ficer (give title low) Senior Vice		Other (s below) sident	респу
(Street) NEW YORK NY 10176 (City) (State) (Zip)					_	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
				Non-Deri	vative	Sec	uriti	ies Ad	cquire	ed, D	isposed o	of, or B	eneficia	lly (Owned	 :			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					n 2A. Deemed Execution Dat		d 3. Date, Transa Code (I			4. Securities Disposed Of			5. Amo Securit Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 03/18/201					015	5			М		2,000	A	\$17.9	41		1,174		D	
Common Stock 03/18/201				015	15			S		2,000	D	\$31.533	.5333(1)		39,174(2)		D		
		Т	able I								sposed of, , converti			y Oı	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any			action (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative urities uired or oosed o) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Options ⁽³⁾	\$17.9	03/18/2015			M			2,000	(4)	01/12/2016	Commor Stock	2,000		\$0	1,000		D	

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$31.51 to \$31.56, inclusive. The reporting person undertakes to provide to ABM Industries Incorporated, any security holder of ABM Industries Incorporated, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote 1 of this Form 4.
- 2. Includes 7,694 RSUs, and DERs relating to the RSUs, adjusted to reflect the cumulative effect of fractional shares, 1,586 performance shares earned but not vested with respect to performance shares granted on 1/14/2013, 565 performance shares earned but not vested with respect to performance shares granted on 1/14/2014, and DERs related thereto.
- 3. Stock options granted under the 2006 Equity Incentive Plan.
- 4. 25% exercisable on 1/12/2010 and 25% on the anniversary date of each of the following three years

Remarks:

By: Barbara L. Smithers, by power of attorney

03/19/2015

** 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.