FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	OMB APPR	OVAL		
TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
	Estimated average burden			

hours per response

0.5

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* <u>CHIN DEAN A</u>					2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ ABM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last)	(Fi	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/09/2024							X	Officer (give title below) SVP - Chief A		coun	below)			
7TH FL				4. If Amendment, Date of Original Filed (Month/Day/Year) 01/11/2024								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
(Street) NEW YO	treet) IEW YORK NY 10006													Λ	Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					eemed ition Date, h/Day/Year)				s Acquired (A) of Of (D) (Instr. 3, 4		l and Securi Benefi Owned		cially I Following	Forn (D) c	n: Direct or Indirect nstr. 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 01/09/2						2024			A		527(1)	A	\$0.0	000 2		26,161		D	
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)	ative Conversion Date Execution Date ity or Exercise (Month/Day/Year) if any		on Date, Transaction Code (Instr.		of Deriv Secu Acqu (A) or Dispo	erivative ecurities cquired (Nonth/Day/ sylvarian (Nonth/Day/			ate Amount o		nt of ities lying ttive ity (Instr. 4)					Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

1. Restricted stock units (RSUs) granted under the 2021 Equity and Incentive Compensation Plan, representing a contingent right to receive shares of common stock. Such RSUs vest in three equal annual installments beginning a year from the grant date, and will settle in shares of common stock. Dividend equivalent rights will accrue.

## Remarks:

This amendment is being filed solely to correct an administrative error by adding to Table I a grant on January 9, 2024 of 527 restricted stock units (RSUs) under the 2021 Equity and Incentive Compensation Plan that was inadvertently omitted from the original filing. Such RSUs represent a contingent right to receive shares of common stock. Such RSUs vest in three equal annual installments beginning a year from the grant date, and will settle in shares of common stock. Dividend equivalent rights will accrue.

> By: David R. Goldman, by power of attorney

01/11/2024

\*\* 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.