FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasiliigtoii,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
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l	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>LUSK JAMES S</u>						2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]									Check a	all app Direc	licable)	1	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 551 FIFTH AVENUE SUITE 300						3. Date of Earliest Transaction (Month/Day/Year) 01/09/2012									X	below	v) ``	b	below) President/CFO	
(Street) NEW YO	ORK N		0176 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Yea							ar)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Code	Transaction Disposed Of (E Code (Instr. 5)			cquired)) (Instr.	(A) or 3, 4 a	4 and Securi Benefi Owned		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ct ect	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Tra		Reported Fransaction(s) Instr. 3 and 4)			(Instr. 4)	
Common Stock 01/09/						/2012		A		1,783(1)		Α	\$0.00		53,156		D			
Common Stock 01/09/						/2012			A		1,580	2)	A	\$0.00		54,736 ⁽³⁾		D		
		Та									sed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	Derivative Security Conversion or Exercise (Month/Day/Year) Price of Derivative Security Conversion of Exercise (Month/Day/Year) If any (Month/Day/Year) If Any (Month/Day/Year) Resecution Date, if any (Month/Day/Year) Resecution Date, if any (Month/Day/Year)		4. Transa Code (8)		str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/I	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Number of Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	bhip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Represents the number of shares earned in connection with the performance shares previously granted on 1/11/2010, based on the achievement of certain targets in the period ending 10/31/2011. These performance shares vest on 1/11/2013.
- 2. Represents the number of shares earned in connection with the performance shares previously granted on 1/11/2011, based on the achievement of certain targets in the period ending 10/31/2011. These performance shares vest on 1/11/2014.
- 3. Includes 32,744 unvested RSUs, 1,627 vested RSUs, the receipt of which has been deferred and DERs relating to the RSUs, adjusted to reflect the cumulative effect of fractional shares, and 12,727 performance shares earned but not vested with respect to performance shares granted on 1/12/2009, 1/11/2010, and 1/11/2011, and DERs related thereto.

Remarks:

By: Barbara L. Smithers, by power of attorney

01/11/2012

** 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.