FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* FARWELL DAVID L							2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]								l applio Directo	,		ner	
(Last) (First) (Middle) 551 FIFTH AVENUE SUITE 300						3. Date of Earliest Transaction (Month/Day/Year) 01/15/2015									oelow)				peony
(Street) NEW YORK NY 10176 (City) (State) (Zip)					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) <mark>X</mark> I	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. Transacti Date (Month/Day)					Exec if an	2A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securi Benefi		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Tran		ed ction(s) 3 and 4)		1	Instr. 4)
Common Stock 01/15/20					2015	15		М		5,000	A	\$18.3	.3		5,173		D		
Common Stock 01/15/20					2015	15		S		5,000	D	\$29.142	(1)	40,1	40,173(2)		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/I		4. Transa Code (8)		n of		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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Stock Options ⁽³⁾	\$18.3	01/15/2015			М			5,000	(4)		06/14/2015	Common Stock	5,000	\$	60	15,000		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 \$29.03 to \$29.50, 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 7,662 RSUs and DERs relating to the RSUs, adjusted to reflect the cumulative effect of fractional shares, 2,791 performance shares earned but not vested with respect to performance shares granted on 3/8/2012, 1,578 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 2002 Price-Vested Plan.
- 4. Exercisable over the first four years in percentages tied to the price of ABM common stock and after eight years from the date of grant, if not previously vested.

Remarks:

By: Barbara L. Smithers, by power of attorney

01/20/2015

** Signature of Reporting Person

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.