FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	S
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  Yospe Joseph F  (Last) (First) (Middle)  551 5TH AVENUE					3. D	Issuer Name and Ticker or Trading Symbol     ABM INDUSTRIES INC /DE/ [ ABM ]      Date of Earliest Transaction (Month/Day/Year) 08/03/2009									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title below) below)  Controller					
SUITE 3 (Street)	SUITE 300 (Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
	NEW YORK NY 10176			_										X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)			Person														
		Tab	le I - Nor	า-Deri\	/ative	Sec	curitie	es Acc	quired,	Dis	posed	of, or B	enefi	icially	y Owne	d .				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amou Securiti Benefic Owned Reporte	es ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)		rice	Transac	ansaction(s) estr. 3 and 4)			(iiisti. 4)	
Common	Stock			08/03	3/2009	)			A		61(1	) A	. \$	S21.49	10,	169 <sup>(2)</sup>	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		3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		ı of		6. Date Exe Expiration Month/Day	Date		Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		rity	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ C F D O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		opiration	Title	or Num of Shar							
Dividend Equivalent Rights <sup>(3)</sup>	(3)	08/03/2009			A		45		(3)		(3)	Common Stock	45	5	\$0.00	45		D		

## **Explanation of Responses:**

- 1. Dividend equivalent rights (DERs) accrued on the restricted stock units granted under the 2006 Equity Incentive Plan. DERs vest in the same manner as the restricted stock units to which they relate. Each DER is the economic equivalent of one share of ABM common stock.
- 2. Includes 10,169 RSUs and DERS relating to the RSUs, adjusted to reflect the cumulative effect of fractional shares.
- 3. DERs accrued on the performance shares granted on 10/1/2007 and 1/8/2008 under the 2006 Equity Incentive Plan. Each DER is the economic equivalent of one share of ABM common stock. DERs vest in the same manner as the performance shares to which they relate.

## Remarks:

By: Barbara L. Smithers, by power of attorney

08/04/2009

\*\* 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.