Edgar Filing: ABM INDUSTRIES INC /DE/ - Form 4

ABM INDUS Form 4 August 08, 2	STRIES INC /D 007	E/									
FORM	IA								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long	er								Expires:	January 31, 2005	
subject to STATEMENT OF CHA				ANGES IN BENEFICIAL OWNERSH				NERSHIP OF	Estimated a		
Section 16. SECURITIES								burden hour response	rs per 0.5		
Form 5	Filed pu	rsuant to S	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	16300136	0.5	
obligation may cont <i>See</i> Instru 1(b).	inue. Section 17			ility Hold	•	· ·		1935 or Sectior 0	1		
(Print or Type F	Responses)										
			2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 160 PACIFI	(First) (C AVENUE, SU	Middle) JITE 222	(Month/D	•	ansaction			Director X_Officer (give below) Senior VP		Owner er (specify urces	
				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check			
								Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of,	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Executio any	ned n Date, if	3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3,	ties Adispose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock (1)	08/06/2007			А	11	A	\$ 22.66	2,081 <u>(2)</u>	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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. Deemed Execution Date, if any (Month/Day/Year)	n Date, if TransactionNumber Exp Code of (M		6. Date Exercisable and Expiration Date (Month/Day/Year)		(Instr. 3 and 4)		8. Price Derivati Security (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Dividend Equivalent Rights (3)	<u>(4)</u>	08/06/2007		А	22	<u>(4)</u>	(4)	Common Stock	22	\$ 0

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Reporting Owners

Reporting Owner Name / Add	ress	Relationships						
	Director	10% Owner	Officer	Other				
Andre Erin M 160 PACIFIC AVENUE SUITE 222 SAN FRANCISCO, CA 94	111		Senior VP - Human Resources					
Signatures								
Erin M. Andre	08/08/2007							
<u>**</u> Signature of	Date							

Explanation of Responses:

- * 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).
- Dividend equivalent rights (DERs) accrued on the restricted stock units granted on under the 2006 Equity Incentive Plan, exercisable (1) proportionately with the restricted stock units to which they relate. Each DER is the economic equivalent of one share of ABM common stock.
- (2) Includes 2,081 RSUs.

<u>**</u>Signature of Reporting Person

- (3) Dividend equivalent rights (DERs) accrued on the performance shares granted under the 2006 Equity Incentive Plan. Each DER is the economic equivalent of one share of ABM common stock.
- (4) These DERs are exercisable proportionately in the same manner as the performance shares to which they relate.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.