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

ABM INDUS Form 4 February 07,	STRIES INC /I 2017	DE/									
FORM	Δ Δ									PPROVAL	
		SECURITIES AND EXCHANGE COM Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0287			
Check this box									Expires:	January 31,	
Section 16.				NGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Estimated a	2005 2005	
									burden hours per		
Form 4 or Form 5			~ • •		~ .				response 0.		
obligation	· ·						•	e Act of 1934,			
may conti	nue. Section I			•	•	· ·		f 1935 or Sectio	n		
<i>See</i> Instru 1(b).	ction	50(II)	of the Inv	vestment	Compan	y Ac	t 01 19 ²	+0			
(Print or Type R	esponses)										
				her Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			Symbol ABM INDUSTRIES INC /DE/				,				
			[ABM]					(Check all applicable)			
(Last)	(First)	(Middle)	3 Date of	Earliest Tra	ansaction			_X_ Director	10%	Owner	
. ,	. ,	. ,		/onth/Day/Year)				- Officer (give title $-$ Other (specify			
ONE LIBER FLOOR	RTY PLAZA, 7	TH	02/06/20)17				below)	below)		
(Street) 4. If A			4. If Amer	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				led(Month/Day/Year)				Applicable Line)			
NEW YORF	K, NY 10006							_X_ Form filed by 0 Form filed by N Person			
(City)	(State)	(Zip)	Tabl	I Non D	animatina (2	tion A or	wined Disposed of	f on Donoficial	ly Owned	
		-						uired, Disposed of		-	
1.Title of Security	2. Transaction D (Month/Day/Yea		3. Transactic				5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(1.101111.2 u), 100	any		Code (D)				Beneficially		Beneficial	
		(Month/Day/Year								Ownership	
						Following Reported	(Instr. 4)	(Instr. 4)			
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	02/06/2017						\$	19 224 (2)	D		
Stock	02/06/2017			А	49 <u>(1)</u>	А	40.4	18,234 <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)	4. Transactio Code (Instr. 8)	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
I. S.	Director	10% Owner	Officer	Other			
CHAVEZ LINDA ONE LIBERTY PLAZA 7TH FLOOR NEW YORK, NY 10006	Х						
Signatures							
By: Barbara L. Smithers, by po attorney	ower of		02/07/20)17			

**Signature of Reporting Person

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).
- (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.
- Includes 9,356 unvested RSUs and 3,724 vested RSUs, the receipt of which has been deferred, and DERs relating to the unvested and vested RSUs, adjusted to reflect the cumulative effect of fractional shares.

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.