Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | |
|--|--|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | urden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

5 Deletionship of Deporting Deposy(s) to Jacus

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 ROSENBERG THEODORE | | | | | ABM INDUSTRIES INC /DE/ [ABM] | | | | | | | | | (Che | eck all applic | cable) | iy reis | 10% Ow | | |
|---|---|--|---|------------|---|----|--------------|---------|------------------------------------|--------|---------------------|---------------|---------------------|--|---|---|--|--------------------|--|--|
| (Last) | (F | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 04/21/2006 | | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Nor | n-Deriva | tive | Se | curit | ties Ac | quired, | Dis | posed o | of, or | Ben | eficiall | y Owned | | | | | |
| | | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | | | | | Benefici Owned F | es ally Following | Form (D) or | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (| A) or D) | Price | Reported Transact (Instr. 3 | tion(s) | | [| Instr. 4) | | |
| Common Stock | | | | 04/21/2006 | | 6 | | | М | | 10,00 | 00 | A | \$8.72 | 4,797,556 | | D | | | |
| Common | mmon Stock | | | 04/21/2006 | | 6 | | | G | v | 2,00 | 0 | D | \$0 | 4,795,556 | | D ⁽¹⁾ | | | |
| Common Stock | | | 04/21/ | /21/2006 | | | | G | V | 2,00 | 0 | A | \$0 | 2,000 | | | (1) | Held by spouse | | |
| | | • | Table II - | | | | | | | | osed of converti | | | | Owned | | | | | |
| | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, Tra | Transaction Code (Instr. | | | | 6. Date E Expiratio (Month/D | n Date | • | of Securities | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4) | Owners Form: Direct (I or Indirect (I) (Instr | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | | | | | |
| Stock | \$8.72 | 04/21/2006 | | N | M | | | 10,000 | 11/01/19 | 97 | 11/01/2006 | Comr | non | 10,000 | \$0 | 0 | Ì | D | | |

Explanation of Responses:

- 1. Gift to reporting person's spouse; reporting person disclaims beneficial ownership of the shares held by his spouse.
- 2. Vested 20% on 11/1/1997, and 20% on the annniversary date each of the following four years.

s/ Theodore Rosenberg

04/25/2006

** 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.