FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL							
l	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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

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* MCCLURE JAMES P						2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]								Check	all app	olicable)		Issuer Owner r (specify
(Last) (First) (Middle) ONE LIBERTY PLAZA 7TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 07/06/2017								X	belov	w) ``	below below	v) .
(Street) NEW YORK NY 10006 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - N	on-Deriv	vative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefici	ally (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						Execution Date,		Transaction Disposed Of Code (Instr.			s Acquired (A) or f (D) (Instr. 3, 4 a		and 5) Secu Bend		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(1130.4)			
Common Stock 07/06/20						017			S ⁽¹⁾		1,970	D	\$40.8	69 ⁽²⁾ 12		6,306 ⁽³⁾	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)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative urity tr. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci:	sable	Expiration Date	Title	or Number of Shares					

Explanation of Responses:

- 1. All sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan entered into by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$40.76 to \$41.02, 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 2 of this Form 4.
- 3. Includes 21,324 unvested RSUs, 83,149 vested RSUs, the receipt of which has been deferred and DERs relating to the RSUs, adjusted to reflect the cumulative effect of fractional shares, 10,205 performance shares earned but not vested with respect to TSR performance shares granted on 9/8/2014, 1,560 performance shares earned but not vested with respect to performance shares granted on 1/15/2015, and DERs related thereto.

By: Barbara L. Smithers, by power of attorney

07/06/2017

** 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.