FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF | CHANGES | IN BENEFICIAL |
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| | | |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Yospe Joseph F | | | | | <u>AI</u> | 2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM] | | | | | | | | | k all appl Direct | icable) or r (give title | ng Person(s) to Iss 10% O Other (s below) | | wner | |
|--|---|--|---|---------|----------------------------------|---|-------|---|-------------------|---|--|-----------------------|--|--|--|--|--|---|---|--|
| (Last) (First) (Middle) 551 5TH AVENUE SUITE 300 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/02/2009 | | | | | | | | | Controller | | | | | |
| (Street) NEW YORK NY 10176 | | | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ' | | | | | |
| (City) | (5 | | (Zip) | n Davis | | | | ^- | | Di- | | -f -= D | - - | | 0 | | | | | |
| Table I - Non-Derive 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | action | ction 2A. Deemed Execution Date, | | | 3. 4. Secur Transaction Dispose Code (Instr. 5) | | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | | 5. Amor Securiti Benefic Owned Reporte | unt of ies ially Following | Form | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock 0 | | | | 02/02 | 2/2009 | /2009 | | Code | V | Amount 75 ⁽¹ | (D) | _ | 14.94 | Transaction(s) (Instr. 3 and 4) 10,032 ⁽²⁾ | | | D | | | |
| | | Т | able II - | | | | | | | | | f, or Ber ible sec | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemo Execution if any (Month/Da | Date, | 4. Transactic Code (Inst | | on of | | Expiration | s. Date Exercisable and Expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of erivative ecurity estr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership Form: | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | xpiration ate | Title | Amor or Numl of Share | per | | | | | | |
| Dividend Equivalent Rights ⁽³⁾ | (3) | 02/02/2009 | | | A | | 64 | | (3) | | (3) | Common Stock | 64 | | \$0.00 | 64 | | 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 10,032 previously reported RSUs and DERS relating to the RSUs.
- 3. Dividend Equivalent Rights (DERs) accrued on the performance shares granted on 10/7/2007 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

02/04/2009

** 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.