FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed 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* MAHONEY SEAN MICHAEL					2. Issuer Name and Ticker or Trading Symbol ABM INDUSTRIES INC /DE/ [ABM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) ONE LIBERTY PLAZA 7TH FL				3. Date of Earliest Transaction (Month/Day/Year) 05/08/2025								Officer (give title Other (specify below) EVP, President-Sales & Mktng						
(Street) NEW YORK NY 10006				_	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv Line)	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		^{Zip)} I - Non-Deri	vativ	ve Secui	rities A	Acqı	uired,	— Dis	posed o	of, or I	Benef	icially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/			ion	2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8)		4.	4. Securities Acquired (A) or				5. Amo Securi Benefi	ount of ities cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Cod	de V	Aı	mount	(A) or (D)	Price		Transa	action(s) 3 and 4)	(III3ti. 4)		(III301. 4)
Common Stock 05/08/2025				025	5		S	1)		12,626	D	\$50.5	5439 ⁽²⁾	3-	4,799	D		
		Tal	ole II - Deriva (e.g.,		Securit , calls, v									Owne	d			
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/Yea	Co	ansaction ode (Instr.	5. Num of Derivat Securit Acquire (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed	Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (or Indir (I) (Instr	(D)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)
						ΙŤ	\dashv					Amou	nt					

Explanation of Responses:

1. The sale of shares reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan entered into by the reporting person on January 9, 2025.

Code

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.11 to \$51.02, inclusive. The reporting person undertakes to provide 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.

Date

Exercisable

(D)

(A)

Expiration

Date

By: David R. Goldman, by power of attorney

Number

Shares

Title

05/09/2025

** 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.