## FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP				
	STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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

	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				]	ABM ]	Symbol DE/ [ A		ker or Trac RIES IN						Reporting Person* <u>Markus</u>	d Address of Vinifred N					
	Officer (give title Other (specify below) below)						Day/Year)	onth/[	saction (M	t Trans		ate o		e)	,	(Fii LBOA AVI	(Last) 9330 BA				
Person	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Ap Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						4. l	3	A 92		(Street) SAN DIE										
		ed	ally Own	eficia	Bene	f, or	osed o	Disp	quired,	s Ac	curitie	Sec	vative	Non-Deri	Table						
of Indirect	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ities Feicially (Display (Disp			4. Securities Acquired ( Disposed Of (D) (Instr. 3 5)		3. Transaction Code (Instr. 8)		A. Deemed kecution Date, any lonth/Day/Year)		Day/Year) if		2. Tran Date (Month	r. 3)	Security (Inst	1. Title of S					
(11341.4)		action(s)	Transa	Price	A) or D)	(A (C	Amount	v	Code												
	D	19,203 <sup>(2)</sup>		A \$		65 <sup>(1)</sup> A		65 <sup>(1)</sup> A		65 <sup>(1)</sup> A			A			9	06/201	05/0		Stock	Common
			y Owned												Tak						
Beneficial Ownership ct (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	8. Price of Derivative Security (Instr. 5)	ount	unt of rities rlying ative rity (In:	and 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date		ative rities ired osed . 3, 4	of Deriv Secu Acqu (A) o Dispo of (D) (Instr			Deemed cution Date, y y tth/Day/Year)	Date (Month/Day/Year)	2. Conversion or Exercise Price of Derivative Security	1. Title of Derivative Security (Instr. 3)					
fr. 3 and 4)  19,203 <sup>(2)</sup> D  od  f		Transa (Instr.  ) 19  / Owned  8. Price of Derivative Security	\$6 str. 3	A enefice curities and unt of rities ritying ative rity (Ins.)	or Be ble se 7. Title Amou Secur Under Derive Secur	65 <sup>(1)</sup> sed of, onvertib able and ear)	Spo S, CC kercis n Date ay/Yea	A ired, Di option 6. Date E Expiratio (Month/D	mber ative rities ired osed	ve Securities Acques, calls, warrants			II - Deriva (e.g., p	3. Transaction Date (Month/Day/Year)	2. Conversion or Exercise Price of Derivative	1. Title of Derivative Security					

## **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 6,336 unvested RSUs and 7,637 vested RSUs, the receipt of which have been deferred, and DERs relating to the unvested and vested RSUs, adjusted to reflect the cumulative effect of fractional shares

/s/ David R. Goldman, by 05/08/2019 power of attorney

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.