## Edgar Filing: ABM INDUSTRIES INC /DE/ - Form 4

ABM INDUS Form 4 August 02, 20	STRIES INC /DE	/								
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMIS								OMB APPROVAL		
<b>Washington, D.C. 20549</b>						COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 31 200 Estimated average burden hours per		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed purs s Section 17(a	) of the Pub		olding Con	npan	y Act of	e Act of 1934, 71935 or Section 0	response	0.5	
(Print or Type R	esponses)									
SALMIRS SCOTT B Symbol			<sup>mbol</sup> BM INDUST	er Name <b>and</b> Ticker or Trading NDUSTRIES INC /DE/			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 551 FIFTH A	(First) (M AVENUE, SUITE	(M	Date of Earliest Ionth/Day/Year) 3/01/2016				Director X Officer (give below) Presi		Owner r (specify	
(Street) 4. If Amer Filed(Mont NEW YORK, NY 10176				ndment, Date Original			6. Individual or Joint/Group Filing(Check			
				ear)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (	Zip)	Table I - Nor	-Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	3. ate, if Transac Code 'Year) (Instr. 8	4. Securi tion(A) or D (Instr. 3,	ties A spose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	08/01/2016		А	143 <u>(1)</u>	А	\$ 37.27	47,839 <u>(2)</u>	D		

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

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 control number.

 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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Tran (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SALMIRS SCOTT B 551 FIFTH AVENUE SUITE 300 NEW YORK, NY 10176			President and CEO					
Signatures								
By: Barbara L. Smithers, by po attorney	wer of		08/02/2016					
**Signature of Reporting Person	n		Date					

## **Explanation of Responses:**

- \* 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).

Dividend equivalent rights (DERs) accrued on the restricted stock units granted under the 2006 Equity Incentive Plan and, if applicable, on performance shares granted under the 2006 Equity Plan, to the extent that such performance shares have been earned under the performance share program relating to such shares. DERs vest in the same manner as the awards to which they relate. Each DER is the

economic equivalent of one share of ABM common stock.
Includes 29,235 RSUs and DERs relating to RSUs, adjusted to reflect the cumulative effect of fractional shares, 2,279 performance shares
(2) earned but not yet vested with respect to performance shares granted on 1/14/2014, 1,039 performance shares earned but not vested with

respect to performance shares granted on 1/15/2015, and DERs related thereto. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.