Edgar Filing: SLIPSAGER HENRIK C - Form 4/A

SLIPSAGE	R HENRIK C											
Form 4/A												
September 1	13, 2005											
FORM	ΛΔ								PPROVA	L		
	UNITED	STATES		RITIES A			COMMISSION	OMB Number:	3235-	0287		
Check the check						Expires:	Januar					
subject t		MENT OI	F CHAN			TICIAL O	OWNERSHIP OF Estimated average			2005		
Section				SECU	RITIES				burden hours per			
Form 4									response 0.5			
Form 5 obligation	-						nge Act of 1934,					
may cor				•	•	· ·	of 1935 or Sectio	on				
See Inst	ruction	30(h)	of the I	nvestment	Compai	ny Act of 1	.940					
1(b).												
(Print or Type	Responses)											
(The of Type	1100p011000)											
	Address of Reporting	Person [*]	2. Issue Symbol	Ignor			f Reporting Person(s) to					
			•	NDUSTR	RIES INC	C/DE/						
			[ABM [*]				(Check all applicable)					
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		X Director	109	% Owner			
~ /		,		Ionth/Day/Year)			X_ Officer (give title Other (specify below)					
				06/14/2005			below) President	President & Chief Exec.Officer				
(Street) 4. J				endment, D	ate Origina	al	6. Individual or Joint/Group Filing(Check					
				onth/Day/Yea	-		Applicable Line)					
06/16				-	/		_X_ Form filed by One Reporting Person					
SAN FRAN	NCISCO, CA 941	11					Form filed by Person	More than One R	eporting			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned	ł		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ties	5. Amount of	6. Ownership	7. Nature	of		
Security	(Month/Day/Year)	th/Day/Year) Execution Date, if any (Month/Day/Year)		Transactio				Form: Direct	Indirect			
(Instr. 3)				Code	Disposed		-	(D) or Indirect				
		(MOIIII/Da	ay/10al)	(Instr. 8)	(insu. 5, 4	4 and 5)		(I) (Instr. 4)	Ownersh (Instr. 4)	ıp		
						(\mathbf{A})	Reported		(
						(A) or	Transaction(s)					
				Code V	Amount		(Instr. 3 and 4)					
Domindom D.	port on a sense 1	for each -1	on of ac-	unition har	ficially	and dimention	ar indiractly					
Kenninder: Re	port on a separate line	e for each cl	ass of sec	unties bene	netany ow	neu urrecuy (or multecuy.					

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Acquired (Disposed o (Instr. 3, 4 5)	of (D)				
				Code	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (1)	\$ 18.3	06/14/2005		А	100,000		(2)	06/14/2005	Common Stock	100,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SLIPSAGER HENRIK C 160 PACIFIC AVE SUITE 222 SAN FRANCISCO, CA 94111	Х		President & Chief Exec.Officer				
Signatures							

''yı

s/ Henrik S. 09/12/2005 Slipsager <u>**</u>Signature of Reporting Person 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).
- (1) Stock option grant under 2002 Price-Vested Performance Stock Option Plan
- Price-Vested Performance Stock Options which vest over the first four years at a rate tied to the price of ABM Common Stock, 50% at (2) \$23.00 and 50% at \$26.00, and after eight years from the date of grant if not previously vested

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.