FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

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

							( )					1 )								
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [ RSG ]  5. Relationship of Reporting Person(s) to Issuer (Check all applicable)														
<u>Vander</u>	<u>Ark Jon</u>				1	11 0	DLIC	<u> </u>	111	ТСЦО	,_11	10.	.50 ]			Directo	or		10% Ov	vner
(1 4)	<b>/</b> F:		(N. 4): -1 -11 - N		3. Date of Earliest Transaction (Month/Day/Year)							X	Officer below)	(give title		Other (s below)	specify			
(Last)	`	,	(Middle)		01/	15/20	021										Pres	siden	t	
18500 N. ALLIED WAY					1	Treatent														
-					4 16	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable												unlina hla		
(Street)					4. 17	Amei	nament	, Date	OTO	riginai F	·liea	(Month/D	ay/ year)		Line)		·			·
PHOENI	$\mathbf{X} = \mathbf{A}$	Z	85054		1										X	Form	filed by One	e Rep	orting Perso	on
(Cit.)	(0)	1-4-)	(7:)													Form : Perso	m filed by More than One Reporting son			orting
(City)	(Si	tate)	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	tr. 3)		2. Transa	ction		A. Deer			3.			ities Acqui			5. Amou				7. Nature
Date (Month/Da					Execution Date, av/Year) if any			e, Transaction Disposed Code (Instr. 5)			d Of (D) (Instr. 3, 4 a			Securitie Benefici				of Indirect Beneficial		
[ (						(Month/Day/Yea			ar)   8								ollowing (i) (Ir		nstr. 4)	Ownership
							[	Code	,	Amount	t (A) or Pr		ice	Reported Transact (Instr. 3	ction(s)			(Instr. 4)		
				•				6		_	- 11	0				l				
		I.	able II - E													Owned				
			(1	e.g., pu	uts, c	cans	, war	rant	s, o	puons	5, C	onverti	ble sec	uritie	:5)					
1. Title of	2.	3. Transaction	3A. Deeme		4		5. Number			6. Date Exercisable and		7. Title and			B. Price of	9. Number of		10.	11. Nature	
					Transa Code (I				Expiration Date Amount of (Month/Day/Year) Securities					Derivative Security			Ownership Form:	ip of Indirect Beneficial		
(Instr. 3)	Price of	(,	(Month/Day		3)	Securities						,	Underlying			Instr. 5)	Beneficially Owned Following		Direct (D)	Ownership
	Derivative Security					Acquired (A) or Disposed of (D) (Instr. 3, 4									rity				or Indirect (I) (Instr. 4)	(Instr. 4)
	,														Reported			,		
																(Instr. 4)	ransaction(s) nstr. 4)			
				L			and 5)										'			
														Amo	unt					
														or Num	ber					
				١,	Code	v	(A)	(D)	Date	e rcisable		kpiration ate	Title	of Shar	.					
					Joue	•	(^)	(5)	LAC	·······································	+		1100	Jilai	-3					
Restricted Stock Units	(1)	01/15/2021			A		548			(2)		(2)	Common Stock	54	8	\$93.81	121,35	8	D	

## **Explanation of Responses:**

- 1. Based on 1 on 1 conversion.
- 2. Reflects dividends paid on the Restricted Stock Units awarded per the Republic Services, Inc. Amended and Restated 2007 Stock Incentive Plan. A portion of Mr. Vander Ark's Restricted Stock Units are held under the Company's Deferred Compensation Plan.

## Remarks:

01/19/2021

\*\* 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.