FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

UNB APPRO	VAL					
OMB Number:	3235-0287					
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Instructio	on 10.																		
1. Name and Address of Reporting Person* Richardson Larson						2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(Firs		3. Date of Earliest Transaction (Month/Day/Year) 10/15/2024								Director 10% Owner Officer (give title below) Other (specify below) SVP Operations								
(Street) PHOENIX (City)	HOENIX AZ 85054										Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Table	e I - Non-D	erivativ	e Se	curitie	s Ac	quired, D	isp	osed o	f, or Bei	neficiall	ly Owned	I					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,			Code (Instr. 5)					es ally Following	6. Owners Form: Dir (D) or Indi (I) (Instr. 4	ect ect	7. Nature of Indirect Beneficial Ownership		
						Code	,	Amount	(A) or (D) Price		Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
		Та	ıble II - Deı (e.ç					uired, Dis	•	,		•	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dai if any (Month/Day/Yo	Cod	nsactio le (Instr	n of Deriv Secu Acqu (A) o Disp of (D	osed) r. 3, 4	6. Date Exe Expiration I (Month/Day	Date	e Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own For Director I (I) (ership n: ct (D) direct nstr. 4)	Beneficial Ownership (Instr. 4)		
				Cod	e V	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares							
Restricted Stock Units	(1)	10/15/2024		A		17		(2)		(2)	Common Stock	17	\$206.49	6,265 ⁽²	3)	D			
Performance Shares (PSUs)	(1)	10/15/2024		A		3		(4)		(4)	Common Stock	3	\$206.49	1,199		D			

Explanation of Responses:

- Based on 1 on 1 conversion.
- 2. Dividends paid on the Restricted Stock Units awarded per the Republic Services, Inc. 2021 Stock Incentive Plan.
- 3. A portion of the Restricted Stock Units are held under the Company's Deferred Compensation Plan.
- 4. Reflects dividend equivalents received on earned Performance Shares ("PSUs") in accordance with the Republic Services, Inc. 2021 Stock Incentive Plan and such PSUs were deferred under the Company's Deferred Compensation Plan.
- 5. The Reporting Person holds these stock units under the Republic Services Stock Investment Fund ("Investment Fund") pursuant to his election under the Company's Deferred Compensation Plan. The Investment Fund is a measurement fund under which units are equal in value to shares of the Company's common stock and are settled in cash and receive dividend equivalents, in the form of additional stock units, each time a dividend is paid on the Company's common stock.

Remarks:

/s/ Lauren McKeon, Attorney-

10/17/2024

in-Fact

** 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.