FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Date | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|--|--------------------------------|--|---|--|----------|--|---------|---|---|---|---|----------------|
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | Person | | |
| | AL | 65054 | | | | | | Form filed by More than One Reporting | | | | |
| (Street) PHOENIX | AZ | 85054 | | | . | | (| , | Line) | | 0. | |
| , | | | 4. If Arr | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | 6. Indi | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| 18500 N. ALLIED WAY | | | 04/14/ | 04/14/2022 | | | | | CAO | | | |
| (Last) | (First) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | - x | Officer (give title below) | below | (specify) | |
| 1. Name and Add GOEBEL F | ress of Reporting F BRIAN A | ^D erson [*] | | er Name and Ticker UBLIC SERV | | | |] | | ationship of Reportir k all applicable) Director | 0 () | ssuer Dwner |

(Instr. 3 and 4) 1 (D) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and Expiration Date (Month/Day/Year) 1. Title of 3. Transaction 3A. Deemed 5. Number 7. Title and Amount of 8. Price of Derivative 9. Number of 10. 11. Nature Conversion Transaction Derivative Date Execution Date of derivative Ownership of Indirect (Month/Day/Year) or Exercise Price of Derivative Securities Underlying Derivative Security Security (Instr. 3) if any (Month/Day/Year) Code (Instr. 8) Derivative Security (Instr. 5) Securities Beneficially Form: Direct (D) Beneficial Securities Ownership Acquired (A) or Disposed of (D) (Instr. 3, 4 Owned or Indirect (Instr. 4) Security (Instr. 3 and 4) Following (I) (Instr. 4) Reported Transaction(s) (Instr. 4) and 5) Amount Numbe Date Expiration of Shares Code v (A) (D) Exercisable Date Title Restricted (1) Common 10,533⁽³⁾ (2) (2) 04/14/2022 \$132.71 Α 36 36 D Stock Units Stock Performance Common (4) 04/14/2022 (4) (4) 1 \$132.71 417 D Shares Α Stock (PSUs)

Explanation of Responses:

1. Each Restricted Stock Unit represents the contingent right to one share of common stock of Republic Services, Inc.

2. Reflects dividend equivalents received on the Restricted Stock Units ("RSUs") as awarded pursuant to 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.

Remarks:

/s/ Eileen B. Schuler Attorney-04/18/2022 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.