FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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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.

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

1. Name and Address of Reporting Person* Ellingsen Catharine D (Last) (First) (Middle) 18500 N. ALLIED WAY (Street) PHOENIX AZ 85054						2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG] 3. Date of Earliest Transaction (Month/Day/Year) 10/15/2024 4. If Amendment, Date of Original Filed (Month/Day/Year)									(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) below) EVP/Chief Legal Officer/Sec 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St	rate) ((Zip)			Person															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,			,	3. Transac Code (Ir 8)		Dispose	rities Acquired (A) ed Of (D) (Instr. 3,			Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	t (A) or (D)		Price			Transac		(moti. 4)	
	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)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr 8)				6. Date Exercisal Expiration Date (Month/Day/Year				Amou Secur Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		opiration	Title	100	Amount or Number of Shares						
Restricted Stock Units	(1)	10/15/2024			A		40			(2)		(2)	Comn		40	\$206.49	13,977	(3)	D		
Stock Units	(4)	10/15/2024			A		58			(4)		(4)	Comn		58	\$206.49	20,612	2	D		

Explanation of Responses:

- 2. Reflects 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. Ms. Ellingsen holds these stock units under the Republic Services Stock Investment Fund ("Investment Fund") pursuant to her 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, Attorneyin-Fact

10/17/2024

** 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.