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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

				. ,								
1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>		2. Issuer Name and Ticker or Trading Symbol <u>REPUBLIC SERVICES, INC.</u> [RSG]						ationship of Reportin k all applicable) Director	X 10%	Owner		
(Last) 2365 CARILLO	(First) ON POINT	(Middle))	3. Date of Earliest Transaction (Month/Day/Year) 05/23/2012						Officer (give title below)	Othe below	r (specify v)
(Street) KIRKLAND (City)	WA (State)	98033 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)			6. Ind Line) X	ividual or Joint/Group Form filed by One Form filed by Mo Person	e Reporting Pe	rson		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Date		2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock			05/23/2012	2	Р		178,785	A	\$26.5008 ⁽¹	72,672,293	D	

	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

(1+)		
CASCAE	DE INVESTMENT	<u>'LLC</u>
	Address of Reporting Perso	
		*

(Last)	(First)	(Middle)						
2365 CARILLON POINT								
(Street)								
KIRKLAND	WA	98033						
(City)	(State)	(Zip)						
1. Name and Address of	of Reporting Person*							
GATES WILLI	<u>AM H III</u>							
(Last)	(First)	(Middle)						
ONE MICROSO								
(Street)								
REDMOND	WA	98052						
(City)	(State)	(Zip)						

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$26.35 to \$26.65. The price set forth above reflects the weighted-average price per share. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

/s/ Cascade Investment, L.L.C. by Alan Heuberger as attorneyin-fact for Michael Larson, Business Manager /s/ William H. Gates III by Alan Heuberger, Attorney-in-

<u>fact</u>

** 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.