FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT | OF CHANG | ES IN BE | NEFICIAL | OWNERS | SHIP |

| OMB APP | ROVAL |
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| OMB Number | 2225 02 |

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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).

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

| | | | | | | | , | | | | | | | | | | | | |
|--|---|------------------------------|---------------------------------|---|--|---|--------|------|---|---------|---|--|---|--|---------------------------------------|--|---|-----------------------------------|------------|
| | | | | 2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) The state of the | | | | | | | |
| (Last) (First) (Middle) 2365 CARILLON POINT | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/16/2014 | | | | | | | | | Director Officer (give title below) | | | X 10% Own Other (spe below) | |
| (Street) KIRKLAND WA 98033 (City) (State) (Zip) | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person | | | | | | |
| | | Tabl | e I - I | Non-Deriv | /ative | Sec | uritie | s Ac | quire | ed, D | isposed c | f, or E | Benefic | ially | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | Year) | Execution Date, | | te, | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | Beneficial Owned Fo | | ities ficially d Following | 6. Owr Form: (D) or (I) (Ins | Direct ndirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Trans | Reported Transaction(s) (Instr. 3 and 4) | | | (instr. 4) |
| Common Stock 06/16/2014 | | | |)14 | 4 | | P | | 500,693 | A | \$36.68 | 6885(1) | | 90,562,135 | |) | | | |
| | | Та | ıble I | | | | | | | | posed of, convertib | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | ive Conversion Date Execution Date, Transaction of Or Exercise (Month/Day/Year) if any Code (Instr. Derivat | | ative rities ired osed | Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Security (Instrand 4) | | | | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dire or I (I) (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| | | Reporting Person* ESTMENT L | <u>LC</u> | | | | | | | | | | | | | | | | |

| 1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u> | | | | | | | |
|--|---------------------|----------|--|--|--|--|--|
| (Last) | (First) | (Middle) | | | | | |
| 2365 CARILLON F | 2365 CARILLON POINT | | | | | | |
| (Street) | | | | | | | |
| KIRKLAND | WA | 98033 | | | | | |
| (City) | (State) | (Zip) | | | | | |
| 1. Name and Address of Reporting Person* GATES WILLIAM H III | | | | | | | |
| (Last) | (First) | (Middle) | | | | | |
| ONE MICROSO | ONE MICROSO | | | | | | |
| (Street) | | | | | | | |
| REDMOND | WA | 98052 | | | | | |
| (City) | (State) | (Zip) | | | | | |

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$36.5850 to \$36.8000. 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 attorney-06/18/2014 in-fact for Michael Larson,

Business Manager

/s/ William H. Gates III by 06/18/2014

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.