## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

washington,	D.C.	2054
	wasnington,	washington, D.C.

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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 S	section	on 30(n)	of the Ir	nvestmei	nt Con	npany Act	of 1940							
				. Issuer Name <b>and</b> Ticker or Trading Symbol REPUBLIC SERVICES, INC. [ RSG ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner						
				3. Date of Earliest Transaction (Month/Day/Year) 09/24/2014									Offic below	er (give title w)		Other below)	(specify		
(Street) KIRKLA (City)			98033 Zip)		Lin					6. Ind Line)	Forn Forn	ual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
		Tabl	e I - No	n-Deriva	ative	Se	curitie	s Acq	uired,	Dis	posed o	f, or I	3ene	ficially	Owne	ed			
1. Title of Security (Instr. 3)		Date	Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securit Disposed 5)			Securi Benefi Owned	cially I Following	Forr (D) (	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	int (A) or Pric			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			09/24/	2014				P		5,000		A :	\$39.39	106	,465,231		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. Deem Execution if any (Month/D	Date,	4. Transa Code ( B)		n of	rative rities ired r osed )	6. Date E Expiratic (Month/D	n Date		7. Title Amou Secur Under Deriva Secur and 4)	nt of ties lying tive ty (Inst	De Se (In:	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F [	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amou or Numl of Share	ber					
		Reporting Person* ESTMENT L	LC			_	-												

1. Name and Address of Reporting Person*  CASCADE INVESTMENT LLC							
(Last)	(First)	(Middle)					
2365 CARILLON POINT							
(Street)	X.7A	00022					
KIRKLAND	WA	98033					
(City)	(State)	(Zip)					
1. Name and Address of Reporting Person*  GATES WILLIAM H III							
(Last)	(First)	(Middle)					
ONE MICROSO							
(Street)							
REDMOND	WA	98052					
(City)	(State)	(Zip)					

Explanation of Responses:

/s/ Cascade Investment, L.L.C.

by Alan Heuberger as attorney-

in-fact for Michael Larson, **Business Manager** 

/s/ William H. Gates III by

Alan Heuberger, Attorney-in-

09/26/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.