FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

msuuci	uon 1(b).			FIIE							Company Act		1954						
1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>					2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) 2365 CARILLON POINT						3. Date of Earliest Transaction (Month/Day/Year) 05/18/2012								Officer (give title Other (specify below) below)					
(Street) KIRKLA (City)			08033 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 - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	ed, Di	isposed o	f, or E	Benefici	ially (Own	ed			
Da Da		2. Transact Date (Month/Day		Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Beneficia		rities ficially ed Following	6. Owner Form: Di (D) or Ind (I) (Instr.	ect irect	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) oi (D)	Price		Trans	action(s) . 3 and 4)			(Instr. 4)			
Common	Stock			05/18/2	012				P		1,397,649	Α	\$25.9)86 ⁽¹⁾	71	,665,310	D		
		Та	ble II								posed of, convertib				vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)		saction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		expiration Date (Month/Day/Year) curities quired or sposed (D) str. 3, 4		Date	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 (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	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>																
(Last) (First) (Middle) 2365 CARILLON POINT																			

1. Name and Address of Reporting Person* CASCADE INVESTMENT LLC										
(Last)	(First)	(Middle)								
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										
(Street)										
REDMOND	WA	98052								
(City)	(State)	(Zip)								

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$25.905 to \$26.15. 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-05/22/2012 in-fact for Michael Larson,

Business Manager

/s/ William H. Gates III by 05/22/2012

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.