FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C 20E40	
Washington,	D.C. 20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per respons	e· 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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Ellingsen Catharine D (Last) (First) (Middle)						Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES, INC. [RSG] Jate of Earliest Transaction (Month/Day/Year) 07/14/2023									all appl Direct Office below	icable) or r (give title)		10% Ov Other (s below)	vner specify
18500 N. ALLIED WAY					0//14/2020												Officer/Sec		
(Street) PHOEN	IX A	Z {	35054		4. If A	Amen	dment	, Date	of Original F	iled	(Month/E	Day/Year)		6. Indi Line) X	Form	filed by One filed by Mor	e Rep	ng (Check Ap norting Perso n One Repo	on
(City) (State) (Zip)				Rul	Rule 10b5-1(c) Transaction Indication														
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,			Code (Instr. 5)				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	Amoun	t (A) or (D)		ce	Transac (Instr. 3	tion(s)			(IIIsti. 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. Deemed Execution Da if any (Month/Day/\(^2\)	n Date,	4. Transac Code (In 8)				6. Date Exercis Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (Ir	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amou or Numb of Share	er					
Restricted Stock Units	(1)	07/14/2023			A		53		(2)		(2)	Common Stock	53	\$	149.98	16,275 ⁽³	3)	D	
Stock Units	(4)	07/14/2023			A		66		(4)		(4)	Common Stock	66	\$	149.98	20,301	.]	D	

Explanation of Responses:

- 1. Based on 1 on 1 conversion.
- 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 Attorney-

07/18/2023

in-Fact

** 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.