## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL					
OMB Number:	3235-0287					
Estimated average burden						
hours per response:	0.5					
	OMB Number: Estimated average burd					

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

					UI .	Section	1 30(11)	oi tiie	ilives	Surient v	Company Ac	01 1940									
						2. Issuer Name <b>and</b> Ticker or Trading Symbol REPUBLIC SERVICES, INC. [ RSG ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
CHOCHDE III V ESTWENT EEC														Dire	ctor	X	10% C	wner			
						3. Date of Earliest Transaction (Month/Day/Year) 05/02/2012									Offic below	er (give title w)		Other below)	(specify		
<u> </u>						4 If Assess descript Date of Original Filed (Mandal ID 1977)								6 Individual or Joint/Croup Filing (Cheek Applicable							
(Street) KIRKLAND WA 98033				_   4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person     Y      Form filed by More than One Reporting Person								
(City)	(St	ate) (2	Zip)																		
		Tabl	e I -	Non-Deriv	vative	Sec	uritie	s Ac	cquir	red, D	Disposed	of, or E	Benefic	ially (	Owne	ed					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Year)	Execution Date,		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	5. Amount of Securities Beneficially Owned Followin		6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)		of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common Stock 05/02/2012				12				P		1,431,914	A	\$27.3	193 <sup>(1)</sup> 68,856,483			D					
		Та	ble I							,	posed of, converti			•	vned						
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Transaction of ecurity or Exercise (Month/Day/Year) if any Code (Instr. Deriva				ative rities ired sed	Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Security (Instrand 4)					8. Price of Derivative Security (Instr. 5)		9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration e Date	Title	Amount or Number of Shares								
1. Name and Address of Reporting Person*  CASCADE INVESTMENT LLC																					

1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>								
(Last)	(First)	(Middle)						
2365 CARILLON F								
(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 \$27.175 to \$27.44. 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-05/04/2012 in-fact for Michael Larson, **Business Manager** /s/ William H. Gates III by

Alan Heuberger, Attorney-in-

05/04/2012

<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.