## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

l	OMB APPROVAL						
l	OMB Number:	3235-0287					
l	Estimated average burden						
l	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 or Section 30(h) of the Investment Company Act of 1940

					UI	Section	1 30(11) (	JI LITE	iiivesu	Hent C	Joinparty Act	01 1940								
1. Name and Address of Reporting Person*  CASCADE INVESTMENT LLC						2. Issuer Name <b>and</b> Ticker or Trading Symbol REPUBLIC SERVICES, INC. [ RSG ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CASCADE INVESTMENT EEC															Direc	ctor	X	10% C	wner	
(Last) (First) (Middle) 2365 CARILLON POINT						3. Date of Earliest Transaction (Month/Day/Year) 08/26/2014									Offic belov	er (give title w)		Other below)	(specify	
(Street) KIRKLAND WA 98033						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						
(City)	(St	ate) (.	Zip)											Λ	Pers	on				
		Tabl	e I - I	Non-Deriv	/ative	e Sec	urities	s Ac	quire	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye					Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			d 5) Secu Bene Own		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)				(11311. 4)	
Common Stock 08/26/2014					)14	.4			P		211,284	A \$39.29		937(1)	37 <sup>(1)</sup> 101,536,960			D		
		Та	ble I								posed of, convertib				vned					
1. Title of Derivative Security (Instr. 3)	vative urity or Exercise Price of Derivative Security  Date (Month/Day/Year)    Month/Day/Year   Execution Date, if any (Month/Day/Year)   Execution Date, i				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O Fe Di oi (i)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares	1						
		Reporting Person*  ESTMENT L	<u>LC</u>																	

1. Name and Address of Reporting Person* <u>CASCADE INVESTMENT LLC</u>									
(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) ONE MICROSO	(First)	(Middle)							
(Street) REDMOND	WA	98052							
(City)	(State)	(Zip)							

## **Explanation of Responses:**

1. This transaction was executed in multiple trades at prices ranging from \$39,1250 to \$39,3500. 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-08/28/2014 in-fact for Michael Larson,

**Business Manager** 

/s/ William H. Gates III by

08/28/2014

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.