FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Vashington, D.C. 20549 | |
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| OMB APPROVAL | | | | | | | | |
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| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average bu | ırden | | | | | | | |
| 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

| Name and Address of Reporting Person* Morris John J | | | | | 2. Issuer Name and Ticker or Trading Symbol WASTE MANAGEMENT INC [WM] | | | | | | | | 5. Re (Che | lationship of ck all applica Director | ble) | J Perso | 10% Ow | /ner | |
|---|--|--|---|---------|---|---|---|-----------|-------------------------------------|--------|------------------------------|--|---------------|---|---|---|---|--|--|
| (Last) 1001 FA | (F NNIN, SUI | irst) TE 4000 | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/29/2013 | | | | | | | | x | below) | | Other (spe below) ld Operations | | pecify |
| (Street) HOUST(| | X state) | 77002 (Zip) | | _ 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Inc Line) | Form file | ed by More than One Reporting | | | |
| | | Ta | able I - No | n-De | rivat | ive S | ecu | rities Ac | quirec | l, Dis | sposed o | of, or | Ben | eficially | Owned | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Tra Date | ınsacti | Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) o | | | 5. Amount Securities Beneficial Owned Fo | ly | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock ⁽¹⁾ | | | 04/ | /29/20 |)/2013 | | I | | 1,042.1302 | | D | \$40.47 | 0.0000 | | | I | By 401(k) Plan | | |
| Common Stock | | | | | | | | | | | | | | | 15,46 | 3.416 | | 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. Deemed Execution Date if any (Month/Day/Ye | ate, | 4. Transa Code (8) | | | | 6. Date I Expiration (Month/I | on Dat | | 7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4) | | Jnderlying Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported | 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 Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | Transaction(s (Instr. 4) | ion(s) | <u> </u> | |
| Phantom Stock Units ⁽²⁾ | \$0.0000 | 04/29/2013 | | | Ι | | | 171.2496 | 08/08/1 | 988 | 08/08/1988 | Comi | | 171.2496 | \$0.0000 | 0.000 | 00 | D | |

Explanation of Responses:

- 1. Transfer of funds out of stock fund of Waste Management Retirement Savings Plan.
- 2. Transfer of funds out of stock fund of Waste Management, Inc. 409A Deferral Savings Plan.

/s/ John J. Morris Jr. 10/08/2013

** 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.