SEC I	Form 4
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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Estimated average burden

hours per response:

0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] Aardsma David A				2. Issuer Name and Ticker or Trading Symbol WASTE MANAGEMENT INC [WMI]							lationship o k all applic Director	able) r	g Perso	10% Ov	vner		
(Last) 1001 FA	`	irst) EET, SUITE 40	(Middle) 00 1001 FA1		3. Date o 06/16/2	of Earliest Trans 2005	action (M	onth/D	Day/Year)				below)	(give title 7P, Sales	and M	Other (s below) [arketing	
(Street) HOUST (City)		X	77002 (Zip)		4. If Ame	endment, Date o	of Original	Filed	(Month/Da	ay/Year)		6. Ind Line) X		led by One led by Mor	e Report	Check App ting Person One Repon	n
	(-	,		-Deriva	ative Se	ecurities Ac	quired,	Dis	posed c	of, or B	enet	ficially	Owned				
Date		2. Transac Date (Month/Da	ay/Year)	3. , Transaction Code (Instr. 8) 4. Securities Act Disposed Of (D)						Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) (D)	or	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)	
						urities Acquis, warrants							wned				
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number of	6. Date E	vercisa	able and	7 Title	and Ar	nount	8. Price of	9. Numbe	r of	10.	11. Nature

Explanation of Responses:

\$<mark>0</mark>

Phantom

Stock

Units⁽¹⁾

1. Phantom stock units accrued under the Waste Management, Inc. Retirement Savings Restoration Plan, a supplemental retirement savin gs plan. A phantom stock unit is equivalent to one share of Common Stock. **Remarks:**

Date

Exercisable

08/08/1988

(D)

Expiration Date

08/08/1988

Title

Commor

Stock

David A. Aardsma

06/20/2005

Date

1,093.4935

D

(Instr. 4)

** Signature of Reporting Person

Amount

Number

of Shares

11.3684

\$<mark>0</mark>

or

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).

06/16/2005

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code V

A

(A)

11.3684

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.