FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| , D.C. 20549 | OMB APPROVAL |
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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* <u>LAVALLEY JIMMY D</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol WASTE MANAGEMENT INC [WMI] | | | | | | | (Ched | ck all application | able) | g Perso | on(s) to Issu 10% Ow | ner | |
|--|--|--|---|-----|--|--|--------------|--|----------------------|---|---|-----------------------------------|---|---|--|-------------------------|--|--|
| (Last) 1001 FA | NNIN | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/15/2006 | | | | | | X | below) | give title or Vice Pi | ve title Other (spe below) Vice President, People | | | | |
| (Street) HOUSTON TX 77002 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Ind Line) X | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date, | | Code (Instr. | | red (A) str. 3, 4 | 4 and 5) Securitie Benefici Owned F | | es Formally (D) (Sollowing (I) (I | | : Direct | 7. Nature of ndirect Beneficial Ownership | | | |
| | | | | | | | | | v | Amount | ount (A) or (D) | | rice | Reported Transacti (Instr. 3 a | ion(s) | | | Instr. 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 Date, if any (Month/Day/Year) | Cod | saction e (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cod | e V | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amo or Num of Sh | ber | | (Instr. 4) | on(s) | | |
| Phantom Stock Units ⁽¹⁾ | \$0 | 06/15/2006 | | A | | 42.8777 | | 08/08/198 | 8 0 | 8/08/1988 | Common Stock | 42.8 | 3777 | \$0 | 6,884.93 | 08 ⁽²⁾ | D | |

Explanation of Responses:

- 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.
- 2. Participant's Company stock fund account on any given date may not exactly equal the number of share equivalents represented by a prior balance plus additions due to variables affecting the determination of Company stock fund unit values under the Plan on any such date.

Remarks:

Linda J. Smith, attorney-in-fact 06/19/2006

** 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.