## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF	CHA	NGE

## S IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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

1. Name and Address of Reporting Person* <u>CALDWELL BARRY H</u>					2. Issuer Name and Ticker or Trading Symbol WASTE MANAGEMENT INC [ WMI ]									Check all a	ector	109	% Owner	
(Last) 1001 FA	(Fi NNIN, SUI	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/04/2007								ficer (give title low) Senior Vi		ner (specify ow) t		
(Street)	ON T	K 7	77001		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						ine) X Fo	,					
(City)	(St		Zip)	- Davis						Dia			. D					
		Tabi	e i - Noi	n-Deriv	ative	: Se	curitie	S ACC	quirea,	DIS	posed o	or, or	Ben	епсі	ally Ow	nea		
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Sec Ben Owi	mount of urities eficially ned Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect		
									v	Amount		(A) or (D)	Price	Trai	saction(s) tr. 3 and 4)		(man. 4)	
Common Stock			03/04	4/2007				F		318		D	\$33	.27 4	2,901.834	D		
		Та									sed of, onvertib				y Owne	d		
Derivative Conversion Date Execusive Or Exercise (Month/Day/Year) if any			3A. Deem Execution if any (Month/Da	n Date, Transaction Code (Instr				6. Date E Expiratio (Month/D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ıstr. 3	8. Price of Derivativ Security (Instr. 5)		Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	ount mber ares				

**Explanation of Responses:** 

Linda J. Smith, attorney-in-fact 03/06/2007

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.