FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| Vashington. | D.C. 205 | 49 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burd | en | | | | | | |
| 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* | | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|--|---|--|---|--|-----|--|-------------|---------------|--|---|------------------------------------|---|--|--|--|---|--|
| CLARK FRANK M | | | | | | | | | | | | - | | X | Director | | | 10% Ow | ner |
| (Lact) | (| First) | (Middle) | | | | | | | | | | | _ | Officer (g below) | ive title | | Other (s | pecify |
| (Last) 1001 FAI | ` | -irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/15/2004 | | | | | | | | belowy | | | belowy | | | |
| SUITE 4 | 000 | | | | | | | | | | | | | | | | | | |
| (Street) | | | | _[| 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Indi | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | | |
| HOUSTO | ON T | ΥX | 77002 | | | | | | | | ^ | | Form filed by More than One Report | | | ng Person | | | |
| (City) | (5 | State) | (Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | ate | action 2A. Deemed Execution Date if any (Month/Day/Year) | | | Coc | Transaction Disposed Code (Instr. | | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | | 5. Amount of Securities Beneficially Following | - | 6. Own Form: I (D) or I (I) (Inst | Direct Indirect Indir | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Cod | le V | V Amount | | | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) |
| | | | Table II - D | | | | | | | | | | | | /ned | | | | |
| 1. Title of | 2. | ts, calls, warrants, options, convertible securities | | | | | | | 8. Price of | 9. Numb | | 10. | 11. Nature | | | | | | |
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 3) | | 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) | | | | Securi Deriva | | nderlying ecurity | Derivative Security (Instr. 5) | derivativ Securiti Benefici Owned Followir Reporte Transac | ve es ially ng d | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercis | able | Expir Date | ration | Title | N: | mount or umber of hares | | (Instr. 4) | | | |
| Stock Units ⁽¹⁾ | \$0 | 07/15/2004 | | A | | 1,200.6861 | | 08/08/1 | 1988 | 08/08 | 8/1988 | Comm | | ,200.6861 | \$0 | 5,670.8532 | | D | |

Explanation of Responses:

1. Stock units accrued under the 2003 Waste Management, Inc. Directors' Deferred Compensation Plan. The stock units will be paid out in shares of common stock following termination of Board service.

Remarks:

Linda J. Smith, attorney-in-fact 07/19/2004

** 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.