FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

S AND EXCHANGE COMMISSION	OMB APPROVAL					
	OMB Number:	3235-0287				
S IN BENEFICIAL OWNERSHIP	Estimated average burden					
IN BENEFICIAL OWNERSHIP	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).

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

Name and Address of Reporting Person* CASELLA JOHN W				CAS	2. Issuer Name and Ticker or Trading Symbol CASELLA WASTE SYSTEMS INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	`	rst) ((Middle)		3. Dat	CWST] 3. Date of Earliest Transaction (Month/Day/Year) 06/11/2009							- ×	Officer (below)	(give title		Other (s below)	pecify	
25 GREENS HILL LANE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	ND V	Γ (05701))	Form file	•		orting Perso One Repo		
(City)	(Si	tate) (Zip)																
		Tab	le I - N	on-Deri	vative \$	Sec	urities	Acq	uired, C)isp	osed of	, or Ben	eficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execu y/Year) if any		Deemed cution Date, ny nth/Day/Year)		Transaction Disposed Code (Instr. and 5)		ties Acquired (A)		5. Amour Securitie Beneficia Owned Followin	es Fo ally (D)		: Direct c	7. Nature of Indirect Beneficial Ownership Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Reported Transact	Reported Transaction(s) (Instr. 3 and 4)		. 4)	11501. 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	Date E (Month/Day/Year) if	Execution if any			4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Restricted Stock Unit	(1)	06/11/2009			A		53,591 ⁽²⁾		(2)		(3)	Class A Common Stock	53,591	\$0	53,59	1	D		

Explanation of Responses:

- 1. Represents the award of Restricted Stock Units ("RSUs") under the Casella Waste Systems, Inc. ("Casella") 2006 Stock Incentive Plan. Each RSU represents a contingent right to receive one share of Casella's Class A Common Stock.
- 2. RSUs reported on this Form 4 shall vest in three equal annual installments beginning on the first anniversary of the Grant Date. The grant to the Reporting Person reported on this Form 4 also includes RSUs that vest upon achievement by Casella of specified performance measures. These RSUs will be reported upon vesting pursuant to Section 16(a) of the Securities Exchange Act of 1934 and applicable regulations thereunder.
- 3. Upon vesting, the Reporting Person is entitled to receive one share of Casella's Class A Common Stock per vested Restricted Stock Unit.

07/06/2009 /s/ John W. Casella

** 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.