Bell Simon G Form 4 March 07, 2013

FORM 4

if no longer

subject to

Section 16.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

BOISE, ID 83706

(State)

03/05/2013

(City)

1.Title of

Security

(Instr. 3)

Common

Stock

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading Bell Simon G Symbol US ECOLOGY, INC. [ECOL]

(First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year)

300 E. MALLARD DR., SUITE 300 03/05/2013

> (Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

(Zip)

2. Transaction Date 2A. Deemed

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

3. 4. Securities TransactionAcquired (A) or

(Month/Day/Year) Execution Date, if Code (Month/Day/Year) (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

(A) or (D) Price

Code V Amount

\$0

A 6,500 18,066 (1)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person Form filed by More than One Reporting

(Check all applicable)

below) VP Operations

Form: Direct

Indirect (I)

(Instr. 4)

D

(D) or

10% Owner

6. Ownership 7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

Other (specify

Issuer

below)

Person

5. Amount of

Securities

Owned Following

Reported

Transaction(s)

(Instr. 3 and 4)

Beneficially

Director

Applicable Line)

X_ Officer (give title

Estimated average

burden hours per

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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)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Option	\$ 25.25	03/05/2013		A	33,300	03/05/2014	03/04/2023	Common Stock	33,300
Common Stock Option	\$ 21.74					07/27/2007	07/27/2016	Common Stock	10,425
Common Stock Option	\$ 23.48					12/06/2008	12/06/2017	Common Stock	7,000
Common Stock Option	\$ 19.71					03/21/2012	02/21/2022	Common Stock	11,200
Common Stock Option	\$ 20.63					01/02/2010	01/02/2019	Common Stock	20,000
Common Stock Option	\$ 15.36					04/08/2010	03/08/2020	Common Stock	11,300
Common Stock Option	\$ 16.18					04/10/2011	03/10/2021	Common Stock	11,100

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Bell Simon G 300 E. MALLARD DR., SUITE 300 BOISE, ID 83706			VP Operations		
0!					

Signatures

/s/ Simon G. Bell	03/07/2013
**Signature of Reporting Person	Date

Reporting Owners 2

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Explanation of Responses:

- * 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).
- (1) Issued pursuant to 2006 Restricted Stock Plan, vesting annually over 3 year period.
- (2) Issued pursuant to 2008 Stock Option Incentive Plan, vesting annually over 5 year period.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.