FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| 1 | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| | hours per response: | 0.5 | | | | | | | | |

| Instruc | tion 1(b). | | | Filed | | | Section 16(a) 30(h) of the I | | | | | 934 | | | | | |
|--|--|-------|--------------|--|---|--|---|---|---|--------------------------------------|--|--|---|--|--|---|------------|
| 1. Name and Address of Reporting Person* Battles Michael Louis | | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>CLEAN HARBORS INC</u> [CLH] | | | | | | | heck all ap Dire | ctor | | 10% O | wner |
| (Last) 42 LON | (Fi GWATER I | , (| vliddle) | | 3. Date of Earliest Transacti 04/01/2021 | | | | | /Day/Year) | | | below) | | other (specify below) and CFO | | |
| (Street) NORWE (City) | | - | 2061 Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) X For For | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Table | I - No | n-Deriva | ative S | ecu | rities Acq | juired, | Dis | posed of | , or Be | nefici | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | ay/Year) if any | | Deemed ution Date, / /th/Day/Year) | Transaction Disposed Code (Instr. 5) | | ies Acquired (A Of (D) (Instr. 3, | | nd Secu Bene Own | 5. Amount of Securities Beneficially Owned Following Reported | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Trans | ted action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock 04/01/2 | | | | | | | | F | | 740 ⁽¹⁾ | D | \$86 | .15 | 57,519 | | D | |
| | | Tal | | | | | ties Acqu varrants, | | | | | | | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any | | ion Date, | Transaction of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price o Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Payment of tax liability by withholding of securities incident to vesting of securities in accordance with Rule 16b-3.

Michael Battles

Amount or Number

of

Shares

Title

04/05/2021 Date

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

Code v

* 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.

(D)

(A)

Date Exercisable

Expiration

Date