FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, B.C. 20040

| STATEMENT OF CHANGES IN BENEFICIAL (| OWNERSHIP |
|--------------------------------------|-----------|
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OMB APPROVAL

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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 Claro Galdino J. | | | | | | HARSCO CORP [HSC] 3. Date of Earliest Transaction (Month/Day/Year) 01/22/2011 | | | | | | | | | | call applicable) Director Officer (give title below) Exec. V.P. & Gro | | J Peisi | 10% Ow | /ner | |
|--|---|--|---|---------|--|--|-----|---|---------------------------------|--------------------------------------|---|--------------------------|---|---|---|---|--|---|--|--|--|
| (Last) 350 POP | Last) (First) (Middle) | | | | | | | | | | | | | | X | | | Other (s below) oup CEO, Hars | | , , | |
| (Street) CAMP HILL PA 17011 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | State) | (Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Deri 1. Title of Security (Instr. 3) 2. Trans Date (Month) | | | | nsactio | n (ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transac Code (II 8) | ction | 4. Securities Acquired (A) on Disposed Of (D) (Instr. 3, 4 on Disposed Of (D) (Instr. 4 on D) | | | or 5. Amour Securitie Beneficia Owned F | | s Illy ollowing | Form | : Direct I Indirect I str. 4) (| 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transacti (Instr. 3 a | on(s) | | | (Instr. 4) | |
| Common | on Stock, \$1.25 par value ⁽¹⁾ 01/22/20 | | | 2/201 | 011 ⁽¹⁾ (1) | | | | M ⁽¹⁾ | | 7,500(1) |) A | (1 |) | 12,4 | 27(1) | | D | | | |
| Common | Stock, \$1.2 | 25 par value ⁽¹⁾ | | 01/2 | 2/201 | 1 ⁽¹⁾ | | (1) | | F ⁽¹⁾ | | 2,540(1) |) D | \$31. | 275 | 9,88 | 37 ⁽¹⁾ | | | | |
| | | | Table II - | | | | | | | | | osed of, convertib | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | | ansaction ode (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate Exerc piration D onth/Day/ | ate | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exe | e ercisable | | xpiration ate | Title | Amour or Number of Shares | er | | | | | | |
| Restricted Stock Units ⁽¹⁾ | (1) | 01/22/2011 | | | M | | | 7,500 | 01/2 | 22/2010 ⁽¹ |) 01 | L/22/2011 ⁽¹⁾ | Common Stock, \$1.25 par | 7,500 | (1) | (1) | 0 | | D | | |

Explanation of Responses:

1. The Restricted Stock Units shall vest as to 50% of the Restricted Stock Units on January 22, 2010 and as to the remaining 50% of the Restricted Stock Units on January 22, 2011 conditioned upon the Grantee's continued employment with the Company as of each vesting date.

Galdino J. Claro

01/25/2011

** 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.