FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL Estimated average burden hours per response: 0.5

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 SCHNOOR STEPHEN J						HARSCO CORP [HSC]									eck all applic Directo	all applicable) Director			/ner
(Last)	,	First)			3. Date of Earliest Transaction (Month/Day/Year) 01/22/2008									helow)	Officer (give title below) Chief Financial Officer				
(Street) CAMP HILL PA 17001-8888 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(.		,	n-Deriv	vativ	e Se	curit	ies A	/cai	uired I	Disr	nosed of	f or Ben	eficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date					-		2A. Deemed Execution Date, if any (Month/Day/Year)		te,	3. Transactio Code (Inst		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		I (A) or	5. Amour	nt of s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
										Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)			(IIISti. 4)
Common Stock, \$1.25 par value															685.1	914(1)		D	
Common Stock, \$1.25 par value															1,742.	1,742.436(1)(2)			Savings Plan
Restricted Stock Units 01/22/					2/200	8				A		4,000	A	(3)	4,0	4,000(3)		D	
			Table II -										or Bene ole secui		Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) if any of (Month/ ative			4. Transa Code (8)		of Deriv Secu Acqu (A) o Disp of (D	r osed) r. 3, 4	Exp	Date Exerc Diration D Dinth/Day/\	ate	le and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisable	Exp Dat	oiration e	Title	Amount or Number of Shares	1				
Restricted Stock Unit -EICP ⁽⁴⁾	(4)									(4)	01/	24/2008 ⁽⁴⁾	Common Stock, \$1.25 par value	(4)		2,500 ⁽	1)	D	
Restricted Stock Units- EICP ⁽⁴⁾	(4)									(4)	01/	24/2009 ⁽⁴⁾	Common Stock, \$1.25 par value	(4)		2,700 ⁽	1)	D	
Restricted Stock Units -	(3)									(3)	01/	23/2010 ⁽³⁾	Common Stock, \$1.25 par	(3)		3,500 ⁽	1)	D	

Explanation of Responses:

- 1. Reflects adjustment made for two-for-one stock distribution on March 26, 2007.
- 2. These shares were acquired under the Harsco Corporation Savings Plan in transactions that were exempt from Section 16(b) by virtu e of Rule 16a-8(b). The information presented is as of December 31, 2007.
- 3. Represents restricted stock units granted under the 1995 Executive Incentive Compensation Plan. Grant has three year pro-rata ve sting. No dividends are paid on the units until they vest.
- 4. Represents restricted stock units granted under the 1995 Executive Incentive Compensation Plan. Each restricted stock unit has a three year vesting period. No dividends are paid on the units until they vest.

Remarks:

Stephen J. Schnoor

** Signature of Reporting Person

01/24/2008

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.