FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. | 20549 | |
|--------------|------|-------|--|
| vasiliigton, | D.C. | 20343 | |

| STATEMENT | OF CHANGES II | N BENEFICIAL | OWNERSHIP |
|-----------|---------------|--------------|-----------|
| | | | |

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|
| | OMB Number: 3235-0287 | | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| ı | 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).

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* Eddy Kathy G | | | HA | Issuer Name and Ticker or Trading Symbol HARSCO CORP [HSC] Date of Earliest Transaction (Month/Day/Year) | | | | | | | (Ch | eck all appli X Directo | , | 10 | to Issi % Ow ner (si | ner | | |
|--|---|--|---|---|--|--------------------------------------|------------|--|---|---------------|--|---|---|---|---|----------------|--|------|
| (Last) | (Fi | rst) | (Middle) | | | 05/09/2023 | | | | | | below) | | | low) | bechy | | |
| TWO LOGAN SQUARE 100-120 N. 18TH STREET, 17TH FLOOR | | | | 4. If / | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Lin | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) PHILAD | ELPHIA P | A | 19103 | | Ru | le 1 | 10h5- | 1 <i>(</i> c) |) Transa | ction | n Inc | lication | <u> </u> | Form f Persor | iled by More า | than One | Repor | ting |
| (City) | (Si | tate) | (Zip) | | $ _{\Box}$ | Checl | k this box | to ind | icate that a tra defense cond | nsactio | n was ı | made pursu | ant to a cor | | ion or written | plan that is i | ntende | d to |
| | | Tabl | e I - Noi | า-Deriv | ative/ | Sec | urities | Ac | quired, D | ispos | sed o | of, or Be | neficial | ly Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | Benefici | es ally Following | 6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4) | t o | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | Code | / Ai | Amount (A) or (D) | | Price | Transac | Transaction(s) (Instr. 3 and 4) | | | 1150. 4) | | |
| | | Т | | | | | | | uired, Dis , options, | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | | ransaction of code (Instr. De | | es d ed | Expiration Date Amo (Month/Day/Year) Secu Unde Deriv | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owne Form Direc or Inc (I) (In: | (D) irect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expir Date | ration | Title | Amount or Number of Shares | | | | | |
| Restricted Stock Units | (1) | 05/09/2023 | | | A | | 13,426 | | (1) | (1 | 1) | Common Stock | 13,426 | \$0 | 13,426 | I | | |

1. Represents restricted stock units granted under the 2016 Non-Employee Directors' Long-Term Equity Compensation Plan. Each restricted stock unit shall vest at the close of business on the earlier of (i) the first anniversary of the grant date or (ii) the annual meeting of the Issuer's stockholders in the year immediately following the year of the grant date.

Remarks:

/s/ Kathy G. Eddy

05/11/2023

** Signature of Reporting Person

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.