

CARLISLE COMPANIES INC

Reported by SALA LAWRENCE A

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/07/08 for the Period Ending 02/05/08

Address 11605 NORTH COMMUNITY HOUSE ROAD

SUITE 600

CHARLOTTE, NC 28277

Telephone 704-501-1100

CIK 0000790051

Symbol CSL

SIC Code 3060 - Fabricated Rubber Products, Not Elsewhere

Industry Chemicals - Plastics & Rubber

Sector Basic Materials

Fiscal Year 12/31



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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Expires: January 31, 2008 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Add	ress of Re	porting	Person *	2	. Is	suer Na	me a	nd Ticke	er or Tra	adir	ng Symb	5. Relati (Check a	onship of l		Person(s)	to Issuer	
SALA LAWR	ENCE.	A				RLISI SL]	LE (COMP	ANIE	S I	NC	X Di	rector		10%	Owner	
(Last)	(First)	(Mi	iddle)	3	3. Date of Earliest Transaction (MM/DD/YYYY)					Offi below)	Officer (give title below)below)			Other (specify			
7152 CORON	ATION	CIRC	CLE					2/5/20	800								
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
FAYETTEVI) (City)	LLE, N	Y 130												Reporting Pe		_	
(eng)	(State)		.,	Deriv	vati	ive Secu	ritie	s Acqui	red, Dis	spos	sed of, o	or Beneficia		than One Rep	orung Perso	п	
				te Deemed Code Acquired (A) or Followi			mount of Secur	ount of Securities Beneficially Owned ing Reported Transaction(s) 3 and 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)						
Tabl	le II - Dei	rivative	Securiti	ies Be	ene	ficially	Own	ed (<i>e.g.</i>	, puts,	cal	ls, warr	ants, optior	ıs, convert	ible secur	rities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Deemed	Code		. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following	Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab	Expira Date	tion	Title	Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)		
Restricted Stock Units	(1)	2/5/2008		A		1805		(2)	(2))	Common Stock	1805	\$0	1805	D		
Deferred Stock Units	(1)	2/5/2008		A		187		(3)	(3))	Common Stock	187	\$0	187	D		

Explanation of Responses:

- (**1**) 1 for 1.
- (2) The restricted stock units are payable in common stock of the issuer (one common share for each unit) upon the reporting person's termination of service as director of the issuer.
- (3) The deferred stock units are payable in cash upon the reporting person's termination of service as a director of the issuer, such payment to be made in a lump sum or in quarterly installments over 10 years based on the closing price of the issuer's stock at such time.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SALA LAWRENCE A								
7152 CORONATION CIRCLE FAYETTEVILLE, NY 13066	X							

Signatures

/s/ Lawrence A. Sala by Steven Ford attorney-in-fact

2/7/2008

** 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 control number.