FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB AP      | PR | OVAL     |
|-------------|----|----------|
| OMB Number: |    | 3235-028 |
|             |    |          |

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

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

| Name and Address of Reporting Person*     CARPANI ANTHONY J |   |  |                |  |        | WESTINGHOUSE AIR BRAKE TECHNOLOGIES CORP [ WAB ]            |   |   |  |   |                       |   |                                      |                        | all app<br>Dired<br>Offic | olicable)<br>ctor<br>er (give title  | g Person(s) to Issuer  10% Owner  Other (specify                  |                                       |  |
|---|---|--|----------------|--|--------|---|---|---|--|---|-----------------------|---|--------------------------------------|------------------------|---------------------------|--|---|---------------------------------------|--|
| (Last)<br>1001 AII  | (F<br>R BRAKE   | •  | (Middle)       |  |        | 3. Date of Earliest Transaction (Month/Day/Year) 03/12/2008 |   |   |  |   |                       |   |                                      | X                      | belo                      | ,  | below)<br>p Executive   |                                       |  |
| (Street) WILMEI (City)                                      | RDING PA  |  | 15148<br>(Zip) |  | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |   |   |  |   |                       |   |                                      | 6. Indiv<br>Line)<br>X | Forn<br>Forn              | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person |   |                                       |  |
|   |   | Tab  | le I - N       | on-Deri                                    | vative | Sec   | uritie  | s Ac                                    | quire  | d, Di   | sposed o              | f, or E   | Benefi                               | cially                 | Owne                      | ed   |   |                                       |  |
| Dat   |   |  | Date           | 2. Transaction<br>Date<br>(Month/Day/Year) |        | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | 3.<br>Transaction<br>Code (Instr.<br>8) |  | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 a |                       |   | and 5) Secu<br>Bene                  |                        | icially<br>d Following    | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                       |  |
|   |   |  |                |  |        |   |   |   | Code   | v   | Amount                | (A) o<br>(D)  | r Price                              | •                      | Trans                     | action(s)<br>3 and 4)  |   | (1130.4)                              |  |
| Common  | Stock - Di  | rect                                       |                | 03/12/                                     | 2008   |   |   |   | A  |   | 22,486                | A   | \$0                                  | .00(1)                 | ) <sup>(1)</sup> 33,731 D |  |   |                                       |  |
| Common  | Stock - Di  | rect                                       |                | 03/12/                                     | 2008   |   |   |   | D  |   | 22,486                | D   | \$34                                 | .2963                  | 1                         | 11,245 D   |   |                                       |  |
|   |   | Ta   | able II        |  |        |   |   |   |  |   | osed of,<br>convertib |   |                                      |                        | wned                      |  |   |                                       |  |
| Security or (Instr. 3) Pri                                  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | if any         | med d. Transa Code 8)                      |        |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |   | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y |   | ate                   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                                      | Deri<br>Sec<br>(Ins    |                           | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4)    | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |                |  |        | v   | / (A) (D)   |   | Date<br>Exercisable                            |   | Expiration<br>Date    | Title   | Amoun<br>or<br>Numbe<br>of<br>Shares | er                     |                           |  |   |                                       |  |

## **Explanation of Responses:**

1. Shares were granted as part of an employee program. Fair market value on 3/12/2008 was \$34.48.

## Remarks:

David M. Seitz, POA for 03/13/2008 Anthony J. Carpani

\*\* 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.