FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
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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 * Rowland Suzanne B							2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [FSTR]									nip of Reportir oplicable) ector	ng Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 415 HOLIDAY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/21/2010											Officer (give title below)		Other (specify below)	
(Street) PITTSBURGH PA 15220 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark> For For	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Code (Instr. 5)						nd Secu Bene Own	Securities I Beneficially (nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or D)	Price	Trans	saction(s) 3 and 4)			(Instr. 4)
Common Stock 05/21/							/2010		A		2,000		A	\$)	6,000		D	
		Ta	able II - D								sed of, onvertib				y Owned	ı			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,		ransaction ode (Instr.				6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Sha						

Explanation of Responses:

Remarks:

Suzanne B. Rowland

05/21/2010

** 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.