FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* Friedman Brian Hunter					2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [FSTR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last)	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/23/2024								X Officer (give title below) Other (specially) SVP, Steel Prods & Spec Proj						
415 HOLIDAY DRIVE, SUITE 100					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) PITTSB	(Street) PITTSBURGH PA 15220														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (2	Zip)		Rul	Rule 10b5-1(c) Transaction Indication														
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially Ow	ned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date			Execution Date,			3. Transaction Code (Instr. 8) 4. Securitie Disposed 0 5)		es Acquired (A) or Of (D) (Instr. 3, 4 and		nd Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
								Code	v	Amount	(A) c (D)	Price	Trans	Transaction(s) (Instr. 3 and 4)			(111341.4)			
Common	Stock			05/23/2	.024			A		3,287	A	. \$0	18,	18,961(1)(2)						
Common Stock														1,066]	L.B. Foster Company 401(k) Plan Shares			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	of 2. 3. Transaction SA. Deemed Lexecution Date, or Exercise (Month/Day/Year) if any Coc			Transa Code (5. Number of Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)		ve es ially Direct (E or Indire (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. Includes 2,663 Performance Restricted Stock Units earned under the 2022-2024 Long Term Incentive Plan granted on 02/17/2022; those 2,663 Performance Restricted Stock Units will settle at the end of the 2022-2024 performance period on December 31, 2024, upon certification by the Compensation Committee.

2. Includes 4,261 Performance Restricted Stock Units earned under the 2023-2025 Long Term Incentive Plan granted on 2/14/2023; those 4,261 Performance Restricted Stock Units will settle at the end of the performance period on December 31, 2025, upon certification by the Compensation Committee.

Remarks:

Brian Hunter Friedman by Judith Balog, attorney-in-fact

05/24/2024

** 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.