# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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*  HASSELBUSCH STAN L  (Last) (First) (Middle)			2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [ FSTR ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner  X Officer (give title Other (specify below)						
L.B. FOSTER COMPANY 415 HOLIDAY DRIVE	FOSTER COMPANY			3. Date of Earliest Transaction (Month/Day/Year) 02/05/2008									President and Chief Executive					
(Street) PITTSBURGH PA 15220	15220			4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting					
(City) (State) (Zip)												Person						
Table I -	Non-Deriva	_			_						ficiall							
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Ye		2A. Deemed Execution Date, if any (Month/Day/Year)		,   <u>;</u>	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			id 5)	5. Amount of Securities Beneficially Owned Following		6. Owners Form: Dir (D) or Ind (I) (Instr. 4	ect Indire irect Bene 1) Own	7. Nature of Indirect Beneficial Ownership		
					Ī	Code	v	Amount	(A) or (D)	Price		Reported Transaction(s (Instr. 3 and 4			(Insti	. 4)		
Common Stock	02/05/2008		3			M		21,939	A	\$4.75		59,756		D				
Common Stock	02/05/2008		3			S		21,939	D	\$45.1315		37,817	7,817 D					
Common Stock	02/06/2008		3			M		22,261	A	\$4.	.75	60,078	60,078 D					
Comon Stock	02/06/2008					S		22,261	D	\$44.1537		37,817	,	D				
Common Stock												25,065	25,065 I		shar equi unit	Approximate share equivalent of units in 401(k) trust		
Table	II - Derivat							sposed of , converti				Owned						
Title of crivative curity or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)		ransa	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Da		cisable and ate	7. Titl of Sec Under	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	deriva Secur Benet Owne Follow Repor	ative rities ficially ed wing rted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	C/	ode	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	or Nu of	umber							
Option to Buy \$5.5						05/15	5/2002 <sup>(1)</sup>	05/14/2012	Comr	non 2	0,000		2	0,000	D			
Option to Buy \$4.75 02/05/2008	:	M	П	21,939		12/12	2/2001 <sup>(2)</sup>	12/11/2011	Comr	non 2	1,939	(3)	2	8,061	D			
Option to \$4.75 02/06/2008		M	П	22,261		12/1	12/2001	12/11/2011	Comr	2	2.261	(3)		5,800	D			

#### **Explanation of Responses:**

- 1. 25% became exercisable on 5/15/02 and an additional 25% became vested on each of the next three anniversaries
- 2.25% became exercisable on 12/12/02 and an additional 25% became vested on each of the next three anniversaries
- 3. Not applicable

# Remarks:

Stan L. Hasselbusch

02/07/2008

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.