FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.0	C. 20549
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Check this box if no longer subject to	STATEMENT OF CHANGE
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 2

GES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* Kelly Brian H					2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [FSTR]											all app	ip of Reporting plicable) ctor cer (give title		10% C	
(Last) (First) (Middle) 415 HOLIDAY DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 02/14/2019										below)			below) President	
(Street) PITTSBURGH PA 15220 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, o	r Ber	nefic	ially	Owne	ed			
			2. Transaction Date (Month/Day/Year)) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					i (A) o	4 and Secu Bend Own		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(IIISU: 4)	
Common	Stock			02/14/2019					F		3,490		D	\$1	7.87		31,653		D	
Common Stock			02/17/2019					F		421	421 D		\$1	7.85	31,232			D		
Common Stock																531			I	L.B. Foster Company 401(k) Plan Shares
		Та									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date, Transacti Code (Ins		nstr.	of Deriv	r osed) r. 3, 4	6. Date Expiration (Month/D	on Dat		or Numb		nstr. 3	Deri Sec	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Brian H. Kelly by Rachelle Horning, attorney-in-fact

02/19/2019

** 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.